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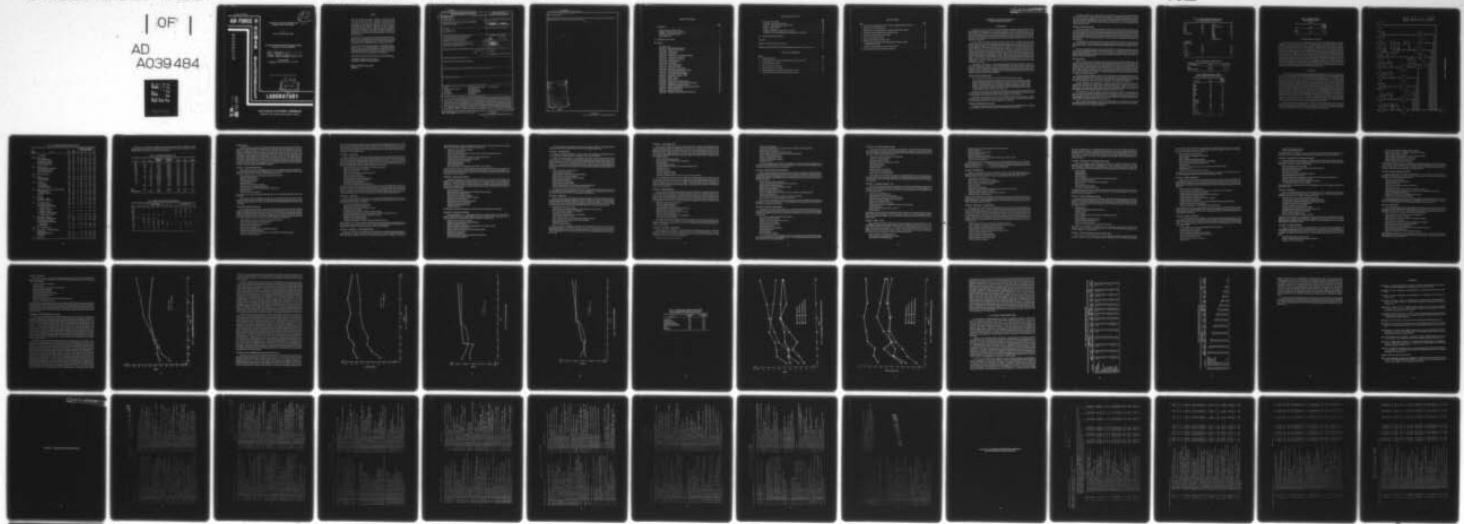
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COMPARATIVE ANALYSIS OF NURSE AND  
MEDICAL SERVICE PERSONNEL

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By

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OCCUPATION AND MANPOWER RESEARCH DIVISION  
Lackland Air Force Base, Texas 78236

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This final report was submitted by Occupation and Manpower Research Division, Air Force Human Resources Laboratory, Lackland Air Force Base, Texas 78236, under project 7734, with HQ Air Force Human Resources Laboratory (AFSC), Brooks Air Force Base, Texas 78235.

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This technical report has been reviewed and is approved for publication.

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identified the most significant problem for nurse and medical service corpsman as the management of hospital wards.  
Recommendations as to the solution of this problem are made.

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## TABLE OF CONTENTS

	Page
<b>I. Introduction . . . . .</b>	<b>5</b>
Definition of Nurse Utilization Field . . . . .	5
Definition of Medical Service Career Field . . . . .	5
Definition of Occupational Analysis . . . . .	6
The Job Inventories . . . . .	6
<b>II. Identification of Job Types . . . . .</b>	<b>8</b>
<b>III. Results . . . . .</b>	<b>8</b>
Job Type Analysis . . . . .	12
Job Types – Group 2489 Medical Service . . . . .	12
Group 2234 – Intensive Care Job Type . . . . .	12
Group 1835 – Charge Nurses . . . . .	13
Group 1685 – Charge Nurses . . . . .	13
Group 1857 – Staff Nurse – General Medicine/Surgery . . . . .	13
Group 1941 – Intensive Care Unit Nurse . . . . .	14
Group 1669 – Coronary Care Unit Nurse . . . . .	14
Group 1163 – OB Charge Nurses . . . . .	15
Group 1089 – Ward NCOIC . . . . .	15
Group 1125 – Airmen Shift Leaders . . . . .	16
Group 797 – Staff Nurse OB Ward . . . . .	16
Group 1324 – Staff Nurse – Surgical Ward . . . . .	16
Group 993 – Staff Nurse Dispensary (Non Specific) . . . . .	17
Group 660 – General Duty Ward Corpsman . . . . .	17
Group 1511 – General Duty Medicine/Surgery . . . . .	18
Group 407 – General Duty Corpsman – OB . . . . .	18
Group 451 – NCOIC – Ward . . . . .	18
Group 462 – NCOIC OB Ward . . . . .	19
Group 287 – Charge Nurse – Outpatient Clinics . . . . .	19
Group 695 – Emergency Room and General Treatment Clinic . . . . .	20
Group 675 – NCOIC Clinics/Emergency Rooms . . . . .	20
Group 352 – NCOIC General Treatment Clinic/Emergency Room . . . . .	20
Group 297 – NCOIC Nursing Services . . . . .	21
Group 258 – Education Coordinator . . . . .	21
Group 148 – Outpatient Clinics and Physical Examination . . . . .	22

Table of Contents (*Continued*)

	Page
Group 103 – Ward Helper . . . . .	22
Group 104 – Aeromedical Evacuation . . . . .	22
Group 68 – Physical Examination Center NCO's . . . . .	23
Group 70 – Sick Call NCO's . . . . .	23
Group 21 – Instructors . . . . .	24
Comparison of Nurse and Medical Service Corpsman . . . . .	24
Comparison of Nurse and Medical Service Corpsman Across Job Types . . . . .	26
 IV. Conclusions and Recommendations . . . . .	33
References . . . . .	37
Appendix A: Tasks Included in Job Inventory . . . . .	39
Appendix B: Difference Between Nurse and Medical Service Corpsman in Tasks Performed . . . . .	48

LIST OF ILLUSTRATIONS

<b>Figure</b>		Page
1 Grouping of job types . . . . .		9
2 Average task difficulty for nurse and medical service corpsman over time . . . . .		25
3 Job difficulty index over time . . . . .		27
4 Curve of best fit for job interest . . . . .		28
5 Curve of best fit for felt utilization . . . . .		29
6 Average task difficulty for ward/non-ward job types over time . . . . .		31
7 Job difficulty index for ward/non-ward job types over time . . . . .		32

## LIST OF TABLES

<b>Table</b>		Page
1 Grade and Total Years Military Service for Nurse and Medical Service Corpsman . . . . .	7	7
2 Mean Number of Tasks Performed . . . . .	7	7
3 Distribution of Nurse, Medical Service Corpsman by Major Air Command . . . . .	7	7
4 Distribution of Nurse/Medical Service Corpsman by Sex . . . . .	8	8
5 Task Data for Major Clusters and Job Types . . . . .	10	10
6 Summary Data for Major Clusters . . . . .	11	11
7 Military Grades Within each Major Cluster . . . . .	11	11
8 Job Satisfaction Variables for Nurse, Medical Service Corpsman in Ward and Non-Ward Job Type . . . . .	30	30
9 Time Spent in Task Families for Select Ward Job Types . . . . .	34	34
10 Intercorrelation Matrix for Select Ward Job Types . . . . .	35	35

## COMPARATIVE ANALYSIS OF NURSE AND MEDICAL SERVICE PERSONNEL

### I. INTRODUCTION

This study is part of a comprehensive experimental program developed in cooperation with a Nursing Resources Study Group appointed by the Air Force Surgeon General. The Nursing Resources Study Group was interested in the development of a quantifiable, empirically sound data base, that would provide Air Force-wide information on Air Force nurse and medical service corpsmen. The purpose of this data and the analysis was to determine the current and future requirements for Air Force nurses. This report is the third in a series of reports designed to analyze tasks that are currently being performed by Air Force nurses and medical service personnel.

As the number of military physicians decreased, the Air Force has developed special training programs to use other health service personnel, with special training, to take over many of their tasks. Some of these programs are still in the experimental stage, while others have become integral parts of the Air Force's health care delivery system. Programs such as the pediatric Nurse practitioner have reduced Air Force pediatricians' work load, while providing quality medical care to Air Force dependents. More recently, a nurse mid-wife specialty has been approved, as it has been demonstrated that most routine obstetrical techniques can be responsibly performed by these specially trained nurses. Other programs such as the physician's assistant and triage nurse are under evaluation as new and dynamic programs that will hopefully be responsive to military health care needs. Most of these programs permit specially trained nurses to assume physician's responsibilities. As these programs expand and absorb more of the limited nursing resource, we must develop a new resource to provide the health care that was previously the responsibility of nurses. The primary candidate for accepting these responsibilities in the Air Force is the medical service corpsman.

The purpose of this report is to make direct comparisons between tasks performed by some 3,115 nurse and medical service corpsman, as well as additional analysis of the relative difficulty of tasks being performed and the job satisfaction of these two groups. Reports describing the job task analysis of the medical service career field and the development of the task difficulty ratings have been previously reported (McFarland, 1974a, 1974b). Reports describing the job type analysis of nursing personnel are in various stages of completion and have yet to be published.

#### Definition of Nurse Utilization Field

Air Force Manual 36-1 defines the nurse utilization field (AFSC 97XX) as follows.

The Nurse Utilization Field encompasses the immediate supervisory and technical responsibility for assigning, training, directing, and evaluating the duty performance of professional nurses and auxiliary nursing service personnel. This includes rendering both in-patient and out-patient nursing care to medical, surgical, psychiatric, obstetrical, pediatric, and communicable disease patients, administering anesthetics under the direction of a medical officer; assisting in surgical operations, participating in flight nursing activities and the preventive medicine programs; providing for the physical, mental, and environmental comfort of patients; and participating in research for the advancement of patient care.

Because the intent of the present study was to identify areas of commonality with the jobs performed by the medical service corpsman, only clinical nurses were selected to be included in the sample. The duties and responsibilities of the clinical nurse (AFSC 975X) according to AFM 36-1 include:

The design of total nursing care for all types of patients; provide total nursing care to include, administration of medications, and treatments in accord with Air Force regulations and doctors orders; providing teaching and consultation; and the management of nursing units.

#### Definition of Medical Service Career Field

The medical service career ladder includes the medical service specialist, AFSC 90230/50, the medical service technician, AFSC 90270, and the medical service superintendent, AFSC 90292.

According to AFM 39-1, the medical service specialist "Performs technical nursing duties involved in the care and treatment of patient; assists in patient movement by air evacuation and ambulance; and assists with non-flying physical examinations." The 7- and 9-skill level descriptions require administrative and supervisory experience and assign greater responsibility for independent duty. The medical service specialist is required to interact and coordinate with patients, physicians, and nurses to provide a comprehensive, high quality patient care service.

#### Definition of Occupational Analysis

The Air Force method of occupational analysis makes use of Air Force-wide job surveys for the collection of quantitative data directly from job incumbents who describe their job within the specialty area. In completing the job survey, each incumbent supplies identification and background data and checks those tasks which are part of their present job. The incumbent then rates the tasks checked on a 7-point scale indicating the relative amount of time spent on each task compared to all other tasks performed. The ratings range from 1 (very much below average) to 7 (very much above average) with 4 being a mid-point (about average).

The techniques for conducting occupational surveys and analysis are reported in a series of research reports dating back to 1958. Past research and continuing experience with survey data derived from the job task inventory indicate that this technique produces highly reliable information about existing Air Force jobs.

Air Force occupational surveys are authorized under AFM 35-2, *Occupational Analysis*, and are part of the Air Force Personnel Test Program. The computer analysis system, Comprehensive Occupational Data Analysis Programs (CODAP), developed for use in the analysis of occupational survey data consists of almost 50,000 program instructions and have been only recently documented in technical reports (Stacey, Weissmuller, Barton, & Rogers, 1974).

#### The Job Inventories

The job inventories were constructed using general procedures described by Morsh and Archer (1967). The nurses job inventory consisted of 648 task statements grouped into 10 duty headings. The medical service job inventory consisted of 600 task statements. There were 575 tasks common to the two inventories. These 575 statements were used for all analyses. The 73 tasks that were unique to the nurses job inventory accounted for less than 7% of the total time spent on all tasks performed by nurses surveyed. The 25 tasks omitted from the medical service inventory accounted for less than 5% of the total time spent on all tasks by medical service specialists. A complete task listing of the 575 common tasks from the inventories is included in Appendix A.

The job inventories contained, in addition to the task statements, a background information section which included biographical items such as name, base, grade, length of time in military service and certain job attitude items such as: "How well does your job utilize your talent and training?" Both the task statements and background information served as integral parts of the comparative job analysis.

The job inventories were administered in accordance with AFM 35-2 at each Air Force base. Approximately 5,400 nurses and medical service corpsmen completed and returned the job inventory for analysis. For this study only clinical nurses were selected providing a sample of  $N = 1,593$ . An approximately equal number of medical service corpsmen was randomly selected ( $N = 1,522$ ). Distributions of the samples on selected background variables are presented in Tables 1, 2, 3, and 4.

The medical service sample represented more years of military service than the nurses (see Table 1). This occurs as an artifact of the structure of the nurses Air Force specialty code, i.e., as a nurse reaches the grade of lieutenant colonel or about 18-20 years of service, their specialty code typically changes to that of an administrative nurse. Since administrative nurses were not included in this study, the medical service corpsman did have the higher mean number of years service.

Table 2 shows a large discrepancy between the average number of tasks performed by nurse and medical service corpsman. This difference is about the same relationship that was found in the total samples and is representative of the two respective populations.

**Table 1. Grade and Total Years Military Service  
for Nurse and Medical Service Corpsman**

2nd Lt	224	Airman	49
1st Lt	382	Airmen 1st Class	465
Capt	668	Sgt	315
Major	275	SSgt	378
Lt Col	32	TSGt	183
Not Recorded	12	MSgt	80
		SMSgt	29
		CMSgt	3
		Not Recorded	15
<b>Years of Military Service</b>			
0-4	871		800
5-8	281		224
9-12	197		118
13-20	229		269
20 or more	16		111
Mean	5.3		7.0

**Table 2. Mean Number of Tasks Performed**

Tasks Performed	Nurse	Medical Service
Mean	199.3113	135.7713
Standard Deviation	96.8459	116.2739

**Table 3. Distribution of Nurse, Medical  
Service Corpsman by Major Air Command**

Command	Nurse	Medical Service Corpsman
AAC	46	51
USAFA	21	0
ADC	19	47
USAFE	159	73
AFCS	12	10
AFLC	34	46
AFSC	134	114
ATC	235	261
AU	41	23
USAFSO	1	4
HQ COMD	35	24
MAC	158	160
PACAF	129	174
SAC	299	273
TAC	241	230
USAFSS	5	0
Not Recorded	18	27

**Table 4. Distribution of Nurse/  
Medical Service Corpsman  
by Sex**

Sex	Nurse	Medical Service Corpsman
Male	90	1,374
Female	1,503	148

## II. IDENTIFICATION OF JOB TYPES

As a first step in the analysis, the CODAP program converts each individual's relative time-spent responses (1-7 scale) to percent time ratings. To obtain the percent time ratings, all of an incumbent's time-spent ratings are summed and the total is assumed to represent 100% of his time spent on the job. Each rating is then divided by the total and the quotient multiplied by 100 to give a percent time spent estimate on each task. For the purpose of organizing jobs into similar units of work, an automated job-clustering computer program was used. This hierarchical-grouping program (Christal & Ward, 1967) is the basic part of the CODAP system for job analysis. The computer compares each individual with every other individual in the sample in terms of percent time spent on each and every task in the inventory. The computer locates the two persons with the most similar jobs and combines them to form a group with a composite job description. In successive stages the program adds other members to this group or forms new groups based on similarity in the percent of time spent on tasks description. This procedure is continued until all individuals and groups are combined to form a single group. At each stage of the grouping process an index of homogeneity is calculated. This index, percentage of time overlap of group members, was explained by Archer (1966) as an estimate of the similarity in work that would be expected if a member of the group was randomly reassigned to another job within the same group.

## III. RESULTS

A summary diagram of the hierarchical grouping analysis is presented in Figure 1. The groups selected for inclusion in this summary were all job types and clusters with either greater than 30% overlap within the group, or a group size greater than 30. The job types are identified in Figure 1 by the smaller circles. The job types may not sum to the size of the clusters because of additional small (i.e., 1-5) member groups having grouped with one or more job types prior to the formation of the major cluster. The job types selected are however, the homogeneous core of groups coming together to form the major clusters. The group numbers in Figure 1 present the stage within the cluster analysis in which they were formed and the number of groups that were present at that stage. For example, Group 1 was the last stage formed and only one group existed at that stage. In contrast Group 2489 was the 626th group formed ( $N = 3,115$ ) and there existed 2,489 separate groups at that stage. The group number also represents the relative homogeneity of the two groups that were combined at any given stage. The clustering algorithm used maximizes the similarity of between groups for combining groups at each stage; thus the groups that were combined to form Group Number 1494 were more homogeneous than the groups that combined to form Group 173. Additional information is given in Table 5. The percent overlap value given in Table 5 is an estimate of the percent of common task time that could be ascribed to a given individual if he were randomly reassigned within the group. Note that for Group 1, the total sample, the percent overlap is 22% indicating that the expected common task time for all nurse and medical service jobs is 22 percent.

The values given representing the number of tasks for the various percentages of time spent by each group are an indicator of the relative breadth or narrowness of the job definition. That is, the greater the number of tasks representing say 50% of the job the broader in general are the responsibilities. Conversely, the fewer the number of tasks, the more narrowly defined and structured is the job.

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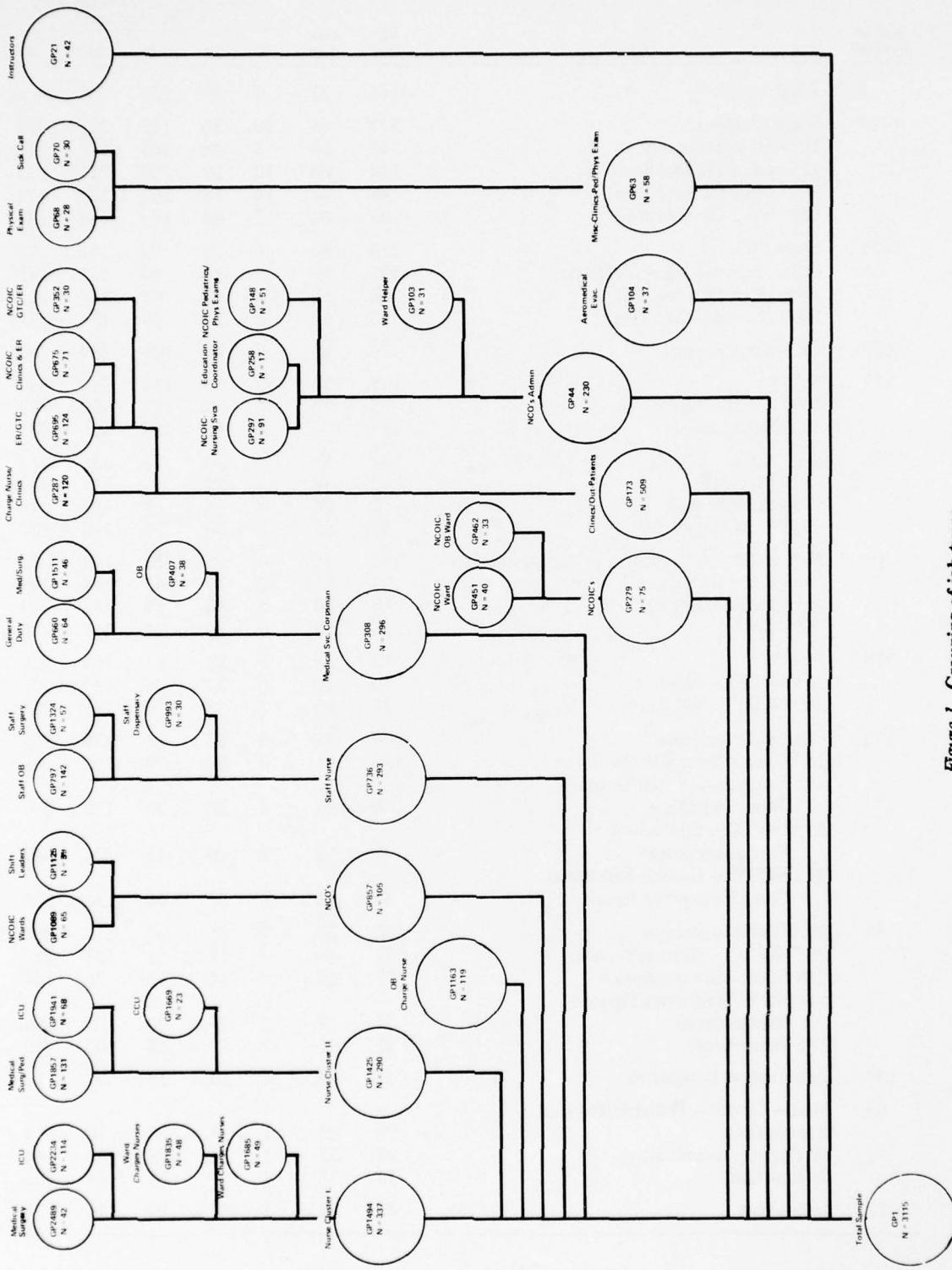


Figure 1. Grouping of job types.

Table 5. Task Data for Major Clusters and Job Types

Group Number	Title	N Size	Over Lap	Number of Tasks Representing Percent Time Spent				
				5	25	50	75	95
1	Total Sample	3115	22	6	49	122	234	430
1494	Nurse Cluster I.	337	61	10	56	125	221	379
	2489 Medical Surgery	42	69	8	48	105	181	310
	2234 Intensive Care Unit	114	66	10	59	129	221	367
	1835 Ward Charge Nurse	48	67	14	76	163	277	439
	1685 Ward Charge Nurse	49	62	7	44	101	186	337
1425	Nurse Cluster II.	290	60	6	39	90	162	294
	1857 Medical Surgery/Pediatric	131	63	6	36	84	151	282
	1941 Intensive Care Unit	68	65	7	43	97	166	287
	1669 Coronary Care Unit	23	63	6	36	84	151	273
1163	OB – Charge Nurse	119	60	7	45	105	189	343
857	NCO's	105	57	10	56	124	219	380
	1089 NCOIC Wards	65	60	9	50	112	198	339
	1125 Shift Leaders	39	60	10	58	128	225	387
736	Staff Nurse	293	51	6	30	73	138	285
	797 Staff OB	142	56	4	28	67	127	254
	1324 Staff Surgery	57	58	4	26	64	122	248
	993 Staff Dispensary	30	55	5	30	73	140	284
308	Medical Service Corpsman – Ward Corpsman	296	45	4	26	68	141	292
	660 General Duty	64	51	3	19	46	94	209
	1511 Medical/Surgical	46	60	5	30	69	132	249
	407 OB	38	48	5	29	76	148	290
279	NCOIC's	75	44	5	32	82	163	321
	451 NCOIC – Ward	40	49	5	32	76	147	285
	462 NCOIC – OB Ward	33	49	5	30	71	144	288
173	Clinics/Out-patients	509	38	5	33	88	176	361
	287 Charge Nurse/Clinics	120	41	4	30	79	163	341
	695 Emergency Room/General Treatment Clinic	124	53	5	30	78	150	301
	675 NCOIC – Clinics and Emergency Room	71	53	8	49	112	204	362
	352 NCOIC – General Treatment Clinic/Emergency Room	30	43	4	27	68	134	270
44	NCO's Administration	230	28	4	25	64	138	306
	297 NCOIC – Nursing Services	91	44	3	21	51	107	282
	258 Education Coordinator	17	48	2	14	37	76	154
	148 NCOIC Pediatrics/Physical Examinations	51	39	2	16	40	85	201
	103 Ward Helper	31	32	2	17	48	100	218
104	Aeromedical Evacuation	37	36	1	10	25	81	215
63	Misc – Clinics – Pediatric/Physical Examination	58	25	1	8	26	70	184
	68 Physical Examination	28	32	1	6	16	43	111
	70 Sick Call	30	28	1	9	28	44	185
21	Instructors	42	32	1	7	19	41	124

Besides the task information, biographical and job attitude data were also collected. This data includes grade, time-in-service, felt utilization in the present job and job interest. A summary of these variables is given in Tables 6 and 7 for each of the major clusters.

*Table 6. Summary Data for Major Clusters*

Group	Nurse	Med Svc	Average Time in Air Force (Months)	Average Number Tasks Performed	Task Difficulty	Job Interest	Felt Utilization
1494	335	2	79.50	272.03	4.51	5.20	4.05
1425	290	0	41.12	200.81	4.37	4.77	3.68
1163	119	0	79.41	238.70	4.55	5.53	4.43
857	0	105	80.94	243.00	4.34	5.55	4.15
736	293	0	37.27	151.98	4.33	4.58	3.35
308	1	295	25.80	130.06	4.07	5.07	3.56
279	0	75	113.48	151.48	4.45	5.13	3.91
173	123	386	101.44	144.62	4.56	5.41	4.20
44	28	202	160.86	82.50	4.85	5.36	4.31
104	4	33	163.64	75.78	4.28	4.43	3.03
63	1	57	57.62	31.36	4.63	5.04	3.07
21	8	34	124.38	28.67	5.46	5.69	4.86
1	1593	1522	75.13	168.27	4.47	5.10	3.84
Nurse	1593	0	66.42	199.31	4.48	5.03	3.83
Medical Service	0	1522	84.03	135.77	4.45	5.17	3.85

*Table 7. Military Grades Within each Major Cluster*

Group	Enlisted Grades							Officer Grades					
	E2	E3	E4	E5	E6	E7	E8	E9	O1	O2	O3	O4	O5
1494									28	77	143	76	7
1425									56	88	131	11	
1163									10	20	56	32	
857	1	23	27	38	10	5			66	99	114	12	2
736													
308	15	188	69	18									1
279		10	15	31	18	1							
173	1	80	89	127	62	20	2		1	7	63	44	9
44	1	15	15	54	49	43	23	2	1	2	10	13	2
104				1	16	14	1	1			1	2	1
63	3	22	17	13	2						3	3	2
21		2	7	8	9	6	1						

### **Job Type Analysis**

A short description of tasks for the job types comprising each major cluster is given in the sequel. In addition to the task information, the relative difficulty of each job type, and job satisfaction of each job type will be discussed in reference to the other job types identified. The task difficulty information was collected by McFarland (1974b) and is defined as the relative time required to learn to perform the task satisfactorily. The values reported here are the average task difficulty per unit time. This is an average of the task difficulty ratings weighted by the percentage of time spent on that task. The original inventories contained two scales measuring job satisfaction. The first scale, job interest, is a 7-point scale ranging from (1) my job is extremely dull to (7) my job is extremely interesting with a mid-point of 4. The second scale, felt utilization is also a 7-point scale. It ranges from (1) my job utilizes my talent and training not at all to (7) my job utilizes my talent and training perfectly. The mid-point for this scale was 3. These variables will be referred to as job interest and felt utilization, respectively.

### **Job Types – Group 2489 Medical Service**

Group 2489 consists of 42 nurses assigned primarily to general medicine and surgery hospital wards. The average number of tasks performed by this group is 235. It is an extremely homogeneous job type. The following 10 tasks account for 5.5 percent of the job types total duty time.

- Answer telephone calls for or from patients or hospital staff members
- Administer oral medications
- Make entries in ward cardexes
- Recopy physicians' orders
- Administer narcotics
- Observe and record condition of patients
- Assist patients to turn, cough and deep breathe
- Label specimens and fill out laboratory specimen request forms
- Ambulate patients
- Make ward rounds with physicians

The nurses in this job type are all captains and lieutenants, with an average length of military service of less than 3 years.

This group is somewhat dissatisfied with their jobs, as the mean job interest was 4.74 and felt utilization was 3.45. These are well below the average satisfaction ratings for all nurses, as shown in Table 6. The task difficulty rating for this job per unit time was 4.37 which is slightly below the average for the total sample.

### **Group 2234 – Intensive Care Job Type**

One hundred and fourteen nurses make up this job type. They, like the previous group, are primarily assigned to general medicine and surgery, with the major exception being that some 23 of the nurses are assigned to the pediatrics ward. They perform an average of 276 tasks. This is an extremely large number of tasks. Like the previous group, this is an extremely homogeneous group. The primary difference in the tasks performed by this group and Group 2489 is the relatively greater time-spent performing post-operative tasks. The 10 tasks that account for the greatest percent of this job type's total time are:

- Answer telephone calls for or from patients or hospital staff members
- Observe and report changes in condition of patients
- Set up intravenous infusion for administration
- Monitor intravenous administration
- Make entries in ward cardexes
- Perform patient admission, transfer or disposition procedures
- Maintain record of surgical procedures
- Check off completed patient care in cardex to insure compliance with physicians' orders
- Administer intravenous infusions

These ten tasks account for a total of 4.61 percent of their total time. Unlike Group 2489, members of this group are satisfied with their jobs with a mean job interest of 5.29 and felt utilization rating of 4.13. The task difficulty for this job type, per unit time, is 4.50 which is average for the other job types in this cluster and slightly above the average for the entire sample. This group is more senior than Group 2489 with an average of over 6 years military service.

#### **Group 1835 – Charge Nurses**

This is the first of two charge nurse job types in this cluster. The primary difference between this group and the following Group 1685 is in the number of tasks performed. Group 1835 performs an average of 350 tasks. This is easily the greatest number of tasks performed by any group. As would be expected by their job title, they have been in the military longer than either of the previous groups, an average of 10 years. The following tasks account for 3.56 percent of their total time spent. This, in contrast to previous groups, indicates the greater diversity of the task requirements for this job type.

- Answer telephone calls for or from patients or hospital staff members
- Observe and record condition of patients
- Make ward rounds alone
- Observe and report changes in condition of patients
- Make entries in ward cardexes
- Evaluate the quality of patient care
- Set up intravenous infusion for administration
- Add medications to intravenous infusions
- Administer intravenous infusions
- Coordinate with physician regarding patient care

As would be expected from a group that has served beyond their contractual obligated service, this group is well above the mean in both job interest and felt utilization of talents and training. This group reported values of 5.38 and 4.40 on these scales, respectively. The average task difficulty for this group was 4.62 which is the highest for any of the job types in the ward job clusters. This is a result of the more difficult administrative tasks performed by this group and consistent with their experience and higher grade.

#### **Group 1685 – Charge Nurses**

This is a second group of charge nurses. In contrast with the preceding Group 1835, this group performs an average of only 251 tasks which is some 100 fewer tasks. The following 10 tasks account for 6.52 percent of the time spent by this group.

- Coordinate with physician regarding patients
- Observe and record condition of patients
- Observe and report changes in condition of patients
- Make entries in ward cardexes
- Coordinate with ward master, (NCOIC) regarding patient care
- Check off completed patient care in cardex to insure compliance with physicians' orders
- Perform patient admission, transfer or disposition procedures
- Maintain record of surgical procedures
- Prepare or maintain inpatient records
- Coordinate with wardmaster (NCOIC) regarding administrative matters

Like the other group of charge nurses, this group has about 10 years of military service and rated their job interest and felt utilization well above the mean (5.50 and 4.44, respectively). The job difficulty was 4.59 reflecting this job types additional supervisory and administrative responsibilities.

#### **Group 1857 – Staff Nurse – General Medicine/Surgery**

This job type represents a relatively large (131 members) group of staff nurses working primarily on general medicine and surgical wards. There is also a small segment (23 members) assigned to the pediatric wards. The group consists almost entirely of lieutenants and captains. An average of 197 tasks are

performed by members of this job type which is the fewest number of tasks performed by any ward job type. The following tasks represent 7.50 percent of their total job.

- Observe and record condition of patients
- Administer oral medications
- Check off completed patient care in cardex to insure compliance with physicians' orders
- Make entries in ward cardexes
- Answer telephone calls for or from patients or hospital staff members
- Observe and report changes in condition of patients
- Administer intramuscular medications
- Recopy physicians' orders
- Perform postoperative care
- Make up instrument sets or surgical packs for delivery room procedures

The job satisfaction for this job type was significantly lower than the ward job types so far discussed. This group has the lowest ratings on both job interest and felt utilization of any job type in this cluster, with a job interest of 4.38 and a felt utilization rating of 3.34. The job difficulty rating was 4.32, which was below the average for the entire sample.

#### **Group 1941 – Intensive Care Unit Nurse**

This job type consists of 68 nurses working in intensive care units on all wards throughout the hospital. They are all lieutenants and captains with just over 3 years of military service. They perform slightly more tasks than the previous group, 212 tasks, but are significantly more satisfied with their jobs (job interest – 5.17 felt utilization = 4.00). Although the total number of tasks they perform is similar to Group 1857 the emphasis is quite a bit different as can be seen from the following tasks that represent 6.45 percent of their total time spent.

- Perform postoperative care
- Make up instrument sets or surgical packs for delivery room procedures
- Monitor intravenous administration
- Observe and record condition of patients
- Observe and report changes in condition of patients
- Administer intravenous infusions
- Assist patients to turn, cough and deep breathe
- Measure and record intake and output
- Administer intravenous medications
- Administer narcotics

The task difficulty rating for this group was 4.43 which is near the average for the total sample.

#### **Group 1669 – Coronary Care Unit Nurse**

This group consisted of 23 nurses assigned primarily to hospital coronary care units. They are relatively inexperienced with an average length of service of less than three years. They performed, as a group, an average of 199 tasks. Typical of their tasks performed are the following.

- Observe and record condition of patients
- Observe and report changes in condition of patients
- Administer intravenous infusions
- Interpret readings from electronic monitoring devices, such as cardiac monitor
- Monitor intravenous administration
- Initiate treatment as a result of interpreting monitoring devices
- Make entries in ward cardexes
- Administer oral medications
- Label specimens and fill out laboratory specimen request forms
- Set up or use oxygen equipment

As a group they were well satisfied with their jobs with job interest ratings of 5.65 and felt utilization ratings of 4.57. The difficulty level of this job was 4.51 which is slightly above average.

#### **Group 1163 – OB Charge Nurses**

Group 1163 is identified in Figure 1 as a major cluster. It was classified as a cluster only because of the size of the group and the importance of comparing it to the other major clusters.

There were no discriminable job types within this cluster; thus it will be treated as a job type. Group 1163 consists of 119 nurses assigned to obstetrics (OB) and gynecology. The grade span for these nurses is lieutenant through major with an average total military service of 6 and one-half years. They performed an average of 239 tasks. This job type differs from the other OB job type (Group 797) primarily in the performance of supervisory tasks. These tasks did not, however, appear among the ten tasks accounting for greatest percent time spent by the job type. The following 10 tasks represent 6.33 percent of their total time spent.

- Monitor the progress of patients in labor
- Assist with vaginal examinations
- Assist physician or another nurse with infant deliveries
- Observe and record condition of patients
- Observe and report changes in condition of patients
- Perform vaginal examinations
- Perform sponge and needle counts
- Monitor intravenous administration
- Answer telephone calls for or from patients or hospital staff members
- Perform patient admission, transfer or disposition procedures

As a group they seem well satisfied with their job, with job interest and felt utilization ratings of 5.53 and 4.23, respectively. Their job difficulty was 4.55 which is slightly above average and consistent with the job satisfaction findings and reflective of their supervisory responsibilities.

#### **Group 1089 – Ward NCOIC**

This is the first job type of medical service corpsman. It consists of 65 airmen in the grades of airmen 1st class through master sergeant. They have been in the military an average of 9 years and identify themselves primarily as NCOIC. They perform an average of 235 tasks and are assigned to wards throughout the hospital. Their jobs are heavily loaded with supervisory tasks, much more so than any of the charge nurse job types previously identified. The following tasks represent 5.34 percent of their time spent.

- Supervise 902X0 or 902X2 personnel
- Determine or evaluate supply or equipment requirements at ward or section level
- Plan or schedule work assignments for personnel
- Take and record blood pressures
- Take and record pulses, temperatures and respirations
- Conduct OJT (on-the-job-training)
- Answer telephone calls for or from patients or hospital staff members
- Direct or supervise the utilization of equipment and supplies
- Determine work priorities
- Clean and maintain equipment

These ten most time consuming tasks show the comparatively large amount of time spent in supervisory and supervisory related tasks. As would be expected from a group that has served beyond their initial obligated length of service, this group reflects a high degree of job satisfaction with mean ratings of 5.65 and 4.46, respectively, for job interest and felt utilization. Their job difficulty rating was 4.44 which is about average.

#### **Group 1125 – Airmen Shift Leaders**

This job type consists of 39 airmen in the grades of airmen 1st class through staff sergeant. They describe themselves as shift leaders although they have little or no supervisory responsibility. They are assigned to wards throughout the hospital. Their common job characteristic appears to be the shift work. The average number of tasks performed by this group is 257, which is a large number of tasks for a group who has only 3 years average military service. As can be seen from the following tasks, they do in fact have little supervisory responsibility and perform tasks that comprise what might be called the "traditional" role for "hospital corpsman".

- Perform general housekeeping duties
- Take and record pulses, temperatures and respirations
- Change dressings
- Clean and maintain equipment
- Administer IPPB (intermittant positive pressure breathing) therapy
- Ambulate patients
- Clean patient care unit
- Administer bed pans or urinals
- Administer complete bed baths
- Collect and label specimens such as urine, feces, or sputum from patients

The job satisfaction level for this group provided very interesting results. The mean job interest for the group was 5.45 which is well above the total sample mean. The felt utilization was however only 3.68 which is slightly below the mean for the total sample. It appears that although members of this group find their job interesting, they also feel they are capable of performing tasks of greater responsibility as indicated by their felt utilization. The difficulty rating for this job type was 4.44 which is essentially the same as the preceding group.

#### **Group 797 – Staff Nurse OB Ward**

This job type and all job types in the staff nurse cluster are typified by the comparatively few number of tasks performed in comparison to the previously identified job types. The staff OB nurses perform an average of 151 tasks. All are assigned to an OB ward. They are relatively junior with an average of only 3 years of military service with only 8 out of the 142 being in the grade of major. Unlike the OB charge nurse they have little or no supervisory responsibility but do have a great deal of patient interaction. The following tasks represent 9.71 percent of their total time and emphasize their patient care responsibilities.

- Monitor the progress of patients in labor
- Assist with vaginal examinations
- Perform sponge and needle counts
- Assist physician or another nurse with infant deliveries
- Observe and record condition of patients
- Observe and report changes in condition of patients
- Take and record blood pressures
- Take and record pulses, temperatures and respirations
- Administer intravenous infusions

As a group, these nurses are slightly below the average satisfaction levels with average ratings of 4.68 on job interest and 3.46 on felt utilization. This is not unusual for younger nurses or medical service corpsmen. The difficulty rating for the job type was 4.37 which reflects their junior grade and lack of supervisory responsibility.

#### **Group 1324 – Staff Nurse – Surgical Ward**

This group performs an average of 157 tasks. They, like the preceding group, are junior with respect to length of military service with the average being only 2.5 years. This group appears to have more administrative tasks to perform than the preceding group. This is reflected in the following set of tasks which represent 10.33 percent of their total time spent.

- Observe and record condition of patients

- Administer oral medications
- Check off completed patient care in cardex to insure compliance with physicians' orders
- Make entries in ward cardexes
- Observe and report changes in condition of patients
- Answer telephone calls for or from patients or hospital staff members
- Monitor intravenous administration
- Prepare or maintain inpatient records
- Administer intramuscular medications
- Administer narcotics

Like the preceding group their relative job satisfaction level is below the average with ratings on job interest of 4.46 and felt utilization of 3.25. The job difficulty for this group was 4.29 which also is below the sample average and lower than the preceding group.

#### **Group 993 – Staff Nurse Dispensary (Non Specific)**

Of the staff nurse job types this is the most senior in military service with over 3 and one-half years total military service experience. This group of 30 nurses performed an average of 170 tasks. The nurses perform general duties in dispensaries with less than 30 patient beds. The ten tasks listed as follows represent the diversity of their duties and also the relatively great amount of time they must spend on administrative matters.

- Observe and record condition of patients
- Perform patient admission, transfer or disposition procedures
- Maintain record of surgical procedures
- Observe and report changes in condition of patients
- Make entries in ward cardexes
- Prepare or maintain inpatient records
- Check off completed patient care in cardex to insure compliance with physicians' orders
- Administer oral medications
- Answer telephone calls for or from patients or hospital staff members
- Serve as chaperone for medical examination or treatment

Of all the job types identified in this study, this job type has the lowest job satisfaction. The reported job interest is 3.77 and felt utilization is 2.97. The job difficulty for this job type is 4.29 and identical to that of the preceding group of staff nurses.

#### **Group 660 – General Duty Ward Corpsman**

All members of the medical service corpsman – ward corpsman cluster have an average of less than two years total military service. This first job type (general duty) perform only 100 tasks on the average. The tasks are typically low level tasks. The following ten tasks represent 14.41 percent of this job type's total time spent.

- Take and record pulses, temperatures and respirations
- Take and record blood pressures
- Make beds other than postoperative or recovery
- Administer bed pans or urinals
- Collect food trays or serving units
- Clean ward utility room
- Perform general housekeeping duties
- Clean patient care unit
- Ambulate patients
- Clean and maintain equipment

It is not surprising that these individuals are below the average level in both job satisfaction variables. Their job interest was 4.62 and felt utilization was 3.11. The job difficulty rating for this job was 3.90, which is the lowest for any job type identified.

#### **Group 1511 – General Duty Medicine/Surgery**

The group of general duty corpsmen performed significantly more tasks than the previous job type. The average number of tasks performed by this group was 158 as compared to only 100 by the previous group. The difference in the most time consuming tasks performed by this group and the previous group is only minor as indicated by the tasks as follows.

- Take and record pulses, temperatures and respirations
- Take and record blood pressures
- Administer bed pans or urinals
- Make beds other than postoperative or recovery
- Clean patient care unit
- Clean ward utility room
- Ambulate patients
- Collect food trays or serving units
- Perform general housekeeping duties
- Measure and record intake and output

Both job interest and felt utilization ratings are substantially higher for this job type and are close to the mean ratings for the total sample. Job interest was 5.28 and felt utilization was 3.72. The difficulty of this job was 4.09 which is only slightly higher than the preceding group but still well below the average for the total sample.

#### **Group 407 – General Duty Corpsman – OB**

This job type performed an average of 140 tasks. It consisted of 38 medical service corpsmen. Like other job types in this cluster, they had a total military service of less than 2 years. All were assigned to an obstetrics ward. As can be seen from the tasks listed as follows, the tasks they perform were quite different from the previous job types.

- Clean delivery or operating room
- Prepare the delivery room for infant delivery
- Assist physician or another nurse with infant deliveries
- Take and record pulses, temperatures and respirations
- Take and record blood pressures
- Prepare infant I.D. bands or footprints
- Make up instrument sets or surgical packs for delivery room procedures
- Sterilize instruments
- Make beds other than postoperative or recovery
- Sterilize supplies

Interestingly, this job type showed the highest level of job satisfaction of any group in the ward corpsman cluster, with job interest ratings of 5.78 and felt utilization ratings of 4.11. The job difficulty for this job type was 4.24 which is the highest of any of the other job types in this cluster, although still well below the sample average.

#### **Group 451 – NCOIC – Ward**

This group consists of senior enlisted personnel with an average of 10 years of military service. They are assigned to various hospital wards with the majority being in orthopedics or pediatrics wards, in contrast to the previous NCOIC job type (Group 1089) which was primarily assigned to general medicine and surgery. The primary tasks performed by this group is the supervision of airmen and administrative activities of the ward. The tasks below reflect this. These ten tasks represent 8.96 percent of the total time spent in this job type. An average of 150 tasks are performed by the group.

- Direct or supervise housekeeping activities
- Plan or schedule work assignments for personnel
- Supervise 902X0 or 902X2 personnel

Evaluate duty performance of (nursing) medical service personnel  
Inventory supplies  
Perform general housekeeping duties  
Maintain training records  
Prepare time schedules for personnel  
Inspect and evaluate adherence to standards of sanitation, cleanliness or safety  
Take and record blood pressures

This group's job satisfaction ratings were near the overall means with ratings of 5.00 for job interest and 3.88 for felt utilization. Their difficulty index was 4.36 which is slightly below average. It is lower than might be expected from a supervisory job type and is a result of a number of low difficulty tasks that must routinely be performed on the ward, such as general housekeeping tasks.

#### **Group 462 – NCOIC OB Ward**

Unlike the other NCOIC job types, the members of this job type spend relatively less time on administrative and supervisory tasks and more time on health-care related tasks. This is reflected in the following task list which represents the ten most time consuming tasks performed by this job type.

Clean delivery or operating room  
Assist physician or nurse with infant deliveries  
Maintain ward or section supply or equipment levels  
Direct or supervise housekeeping activities  
Inventory supplies  
Prepare items for sterilization  
Determine or evaluate supply or equipment requirements at ward or section level  
Prepare the delivery room for infant delivery  
Organize supplies or equipment for delivery room procedures  
Supervise 902X0 or 902X2 personnel

Similar to the other NCOIC job types, this job-type performed an average of 156 tasks and had a reported job interest level of 5.39 and a felt utilization of 3.96. The average task difficulty was 4.54 which is about average reflecting fewer low level housekeeping tasks than in the preceding job types and some high level patient care tasks (e.g., help deliver baby).

#### **Group 287 – Charge Nurse – Outpatient Clinics**

This is the first of the clinic job types. Generally the clinic job types were much less homogeneous than the ward job types. This is a result of the varied patient load level in number and type of ailment and the more flexible organizational structure necessary to meet the variant patient loads. This first job type consisted of 112 nurses and 8 medical service corpsmen. Although the title of charge nurse is inappropriate for the medical service corpsman, the title is used since there was basically no difference in the tasks performed between the nurses and medical service corpsmen in this job type. This group performed on the average of 144 tasks. They were assigned to a wide variety of clinics and emergency rooms. The diversity of the tasks performed is demonstrated by the following ten tasks that represented 9.89 percent of time spent for the job type.

Answer telephone calls for or from patients or hospital staff members  
Screen outpatients to determine their classification or priority of treatment  
Serve as chaperone for medical examination or treatment  
Prepare patients for physician examination or treatment  
Label specimens and fill out laboratory specimen request forms  
Prepare or maintain outpatient records  
Write prescriptions for physician signature  
Prepare the delivery room for infant delivery  
Prepare consultation requests for lab slips  
Take and record blood pressures

As would be expected, this was a comparatively senior group in terms of time in military service with an average of just under 10 years. As with most other groups with more than 4 years military service, Group 287 had an above average level of job satisfaction. Values for job interest and felt utilization were 5.24 and 4.00, respectively. The level of difficulty for this job type was 4.65 which is higher than was found for the charge nurse job types on the ward. This is consistent with the higher levels of satisfaction found in non-ward job types.

#### **Group 695 – Emergency Room and General Treatment Clinic**

This job type consists of 122 medical service corpsmen and 2 nurses, all of whom work in either emergency rooms, outpatient clinics, or dispensaries. As a group, they perform an average of 159 tasks. These tasks reflect the triage function performed by this job type. The following tasks represent 8.48 percent of this group's time spent and reflect the types of tasks that represent this first line of medical care.

- Apply bandages
- Change dressings
- Administer first aid
- Suture lacerations
- Answer telephone calls for or from patients or hospital staff members
- Clean and maintain equipment
- Take and record pulses, temperatures and respirations
- Remove sutures
- Take and record blood pressures
- Administer intramuscular medications

As a group, they have an average time in military service of just over 6 years. Their reported job satisfaction is well above average with mean ratings on job interest of 5.52 and felt utilization of 4.31. The job difficulty rating for this group is 4.53.

#### **Group 675 – NCOIC Clinics/Emergency Rooms**

This job type is very similar in task performance to Group 695. The primary difference being that the supervisory tasks represent a greater percentage of time than they did in the preceding group. This group consists of 6 nurses and 65 medical service corpsmen. They perform an average of 221 tasks. As a group they have an average of almost 14 years of military service. The tasks that represent 5.82 percent of their time spent are as follows.

- Apply bandages
- Coordinate with physician regarding patient care
- Administer first aid
- Change dressings
- Answer telephone calls for or from patients or hospital staff members
- Remove sutures
- Prepare consultation requests or lab slips
- Supervise 902X0 or 902X2 personnel
- Take and record blood pressures
- Suggest or order laboratory or X-ray procedures for patients

Their reported job satisfaction is extremely high with a job interest mean rating of 5.52 and a felt utilization mean of 4.31. Average task difficulty was 4.73 which is well above the average making this one of the most difficult job types identified.

#### **Group 352 – NCOIC General Treatment Clinic/Emergency Room**

This job-type consists of 30 medical service corpsmen assigned as NCOIC's of outpatient clinics. Their job-type is typified by supervisory and management tasks. They perform only 116 tasks on the average and

as would be expected by the job title are relatively senior in grade and time in service with an average of over 14 years of military service. The following tasks reflect the supervisory aspects of their jobs and account for 10.02 percent of their total time spent.

- Supervise 902X0 or 902X2 personnel
- Plan or schedule work assignments for personnel
- Apply bandages
- Direct or supervise housekeeping activities
- Direct or supervise the utilization of equipment and supplies
- Coordinate with physician regarding patient care
- Remove sutures
- Inspect and evaluate adherence to standards of sanitation, cleanliness or safety
- Administer first aid
- Develop or improve work methods or procedures

As a group, they are well satisfied with their current positions as reflected in their job interest ratings of 5.60 and felt utilization ratings of 4.62. The average task difficulty was 4.68.

#### **Group 297 – NCOIC Nursing Services**

This is the most senior in terms of grade and time in service, of any of the job types identified. This group had served an average of 19.5 years of military service and contained 6 nurses and 85 airmen. As a group, they are primarily administrators and spend relatively little time in direct patient care. The following tasks represent 12.31 percent of their total time spent and reflect the administrative responsibilities of this job type.

- Supervise 902X0 or 902X2 personnel
- Direct or supervise the preparation of performance or efficiency ratings on subordinates
- Coordinate work activities with other sections
- Evaluate utilization of (nursing staff) (medical service) personnel
- Counsel personnel on personal problems
- Counsel personnel on performance evaluations or standards
- Determine personnel requirements
- Conduct inspections of wards or other areas where Medical Service Personnel are employed
- Distribute administrative communications
- Evaluate duty performance of (nursing) (medical service) personnel

As would be expected from a senior group their reported job satisfaction is well above average with job interest ratings of 5.60 and felt utilization of 4.64. Their average task difficulty was 5.06. This is the second highest difficulty level found for any job type. It reflects a great amount of supervisory and administrative responsibility for this job type.

#### **Group 258 – Education Coordinator**

This is a very small job type consisting of only 7 nurses and 10 medical service corpsman. They perform training tasks at both the medical service schools and also monitor the OJT training within the Air Force. They have an average of 12 years service and are primarily of interest because of the extremely high level of job satisfaction. The mean level of job interest was 5.94 and felt utilization was 5.12. The tasks they perform include:

- Conduct orientation sessions for (nursing) (medical service) personnel
- Conduct OJT (on-the-job-training)
- Perform educational counseling
- Conduct continuous inservice education programs
- Plan or develop educational programs or conferences
- Demonstrate nursing procedures
- Obtain training aids, space or equipment
- Evaluate OJT

- Conduct formal classroom training
- Operate audio-visual equipment

These tasks represent 17.91 percent of their total time spent on tasks. The average task difficulty for this job type was 5.35. This is the highest task difficulty value obtained for any of the reported job types.

#### **Group 148 – Outpatient Clinics and Physical Examination**

This group contains 51 airmen assigned to outpatient clinics, primarily physical examination centers. They have an average of 12 years of military service and perform an average of only 69 tasks. The following tasks represent 16.14 percent of their total time spent.

- Prepare consultation requests or lab slips
- Answer telephone calls for or from patients or hospital staff members
- Take and record blood pressures
- Determine work priorities
- Take and record pulses, temperatures and respirations
- Supervise 902X0 or 902X2 personnel
- Schedule diagnostic tests, consultations or special procedures with appropriate departments
- Develop or improve work methods or procedures
- Label specimens and fill out laboratory specimen request forms
- Coordinate work activities with other sections

Their reported level of job interest was 5.51 and felt utilization was 4.29. The average task difficulty for this group was 4.66.

#### **Group 103 – Ward Helper**

This is a low level administrative job type. The group has a total of 5 nurses and 26 medical service corpsmen. They performed an average of only 69 tasks. The job type is extremely heterogeneous. The following tasks account for 16.14 percent of their total time spent.

- Coordinate with wardmaster (NCOIC) regarding patient care
- Answer telephone calls for or from patients or hospital staff members
- Coordinate with wardmaster (NCOIC) regarding administrative matters
- Coordinate with physician regarding patient care
- Prepare consultation requests or lab slips
- Orient new patients to hospital rules and facilities
- Label specimens and fill out laboratory specimen request forms
- Notify physicians of patient arrivals and status
- Prepare or maintain inpatient records
- Observe and report changes in condition of patients

Because of the small number of tasks performed and the lack of freedom demonstrated in the tasks performed, (e.g., coordinate with wardmaster) not surprising is the fact that this group had the lowest reported level of job satisfaction with job interest ratings of 4.16 and felt utilization of 2.93. The average task difficulty for this job type was 4.46.

#### **Group 104 – Aeromedical Evacuation**

This was a group of 4 nurses and 33 airmen assigned to aeromedical evacuation staging areas. The nurses present in this grouping are not aeromedical nurses, but rather staff nurses. This is emphasized to avoid possible misinterpretation. The average time in service for this group was 14 years. They performed an average of 76 tasks. The following are the ten tasks accounting for 24.90 percent of their total time spent.

- Secure medical equipment prior to take-off
- Enplane or deplane patients during aeromedical evacuation
- Prepare aircraft to receive patients

- Prepare or give preflight and inflight briefings to patients
- Prepare medical supplies or equipment for aeromedical evacuation
- Plan or provide nursing care in flight
- Perform preflight check of patient care area on aeromedical aircraft
- Prepare and give preflight briefing to medical crew
- Supervise preparation of aircraft to receive patients
- Operate inflight emergency oxygen systems

This group had a relatively low level of job satisfaction with job interest ratings of 4.43 and felt utilization of 3.03. This low level of satisfaction may be because they are misclassified as staff nurses and medical service corpsmen when in fact they would be better classified in an aeromedical AFSC and have the opportunity to fly. The average task difficulty for this group was 4.63.

#### **Group 68 – Physical Examination Center NCO's**

This job type consists of 28 airmen. The group itself is not well defined in that no single task is performed by all members in the job type. They perform an average of only 26 tasks. Tasks representing 36.02 percent of this job types total time spent are:

- Take and record blood pressures
- Prepare consultation requests or lab slips
- Administer hearing tests
- Take and record pulses, temperatures and respirations
- Administer vision tests
- Answer telephone calls for or from patients or hospital staff members
- Schedule diagnostic tests, consultations or special procedures with appropriate departments
- Take electrocardiograph (EKG) tracings
- Suggest or order laboratory or x-ray procedures for patients
- Coordinate work activities with other sections

The unique characteristic of this group is that the patients they see are primarily healthy and are not in fact seeking medical help. The group reports a job satisfaction level below average with an average job interest of 5.00 and felt utilization of 3.18. The average difficulty for this job type was 4.41.

#### **Group 70 – Sick Call NCO's**

Like the preceding group, this is a poorly defined job type with no task being performed by all the members of this group. They perform on the average only 37 tasks. These tasks reflect the general type of screening that is done at sick call or in a general treatment clinic. The group consists of 29 airmen and one nurse. Tasks accounting for 25.83 percent of their total time spent include:

- Label specimens and fill out laboratory specimen request forms
- Prepare consultation requests or lab slips
- Answer telephone calls for or from patients or hospital staff members
- Take and record blood pressures
- Take cultures to determine the existence of disease-producing organisms
- Take and record pulses, temperatures and respirations
- Write prescriptions for physician signature
- Screen outpatients to determine their classification or priority of treatment
- Perform general housekeeping duties
- Suggest or order laboratory or x-ray procedures for patients

Their average job interest was 5.07 and felt utilization an extremely low 2.97. This suggests that although these personnel find their jobs interesting, they clearly feel they are capable of much greater responsibility. The difficulty level for this job was 4.16.

### **Group 21 – Instructors**

This group consists of 34 airmen and 8 nurses assigned as instructors at Air Force Medical Service Schools. Their primary job is teaching. This is reflected in the following tasks that represent 32.03 percent of their total time spent:

- Conduct formal classroom training
- Write lesson plans
- Administer written, oral or performance examinations
- Operate audio-visual equipment
- Perform educational counseling
- Obtain training aids, space or equipment
- Demonstrate nursing procedures
- Maintain training records
- Participate in continuous inservice education programs as a learner
- Evaluate formal classroom training

As a group they performed only 29 tasks on the average but unlike many of the other groups that performed very few tasks, this group had a high level of job satisfaction with a job interest rating of 5.69 and felt utilization rating of 4.86. The average difficulty level for this group was 5.46 which is the highest value found for any cluster and higher than any of the job types. It is interesting that the two education related groups, this and group 258, have the highest task difficulty and also were extremely high in the job satisfaction ratings.

### **Comparison of Nurse and Medical Service Corpsman**

Overall, as shown in Table 6, the nurses perform significantly more tasks than do the medical service corpsmen. A listing of task differences in percent members performing are included in Appendix B. Inspection of Appendix B shows a large number of tasks that a higher percent of nurses perform in contrast to the medical service corpsmen. This is in part a function of the disparity in the average number of tasks performed by the two groups (see Table 6). The tasks that showed the greater percent members performing in favor of nurses could be classified into three basic categories: First, the tasks that related to the treatment of female patients; secondly, those tasks that had to do with the administration and accountability of narcotics and certain types of drugs and; thirdly, those tasks directly related to the operating room. The first two of these task categories, female patient tasks and narcotic tasks, have legal and moral implications that require that nurses, and in the first instance, female nurses perform these tasks. The last category, operating room tasks, reflects the greater flexibility that the nurses possess and a lack of training in operating room techniques received by the medical service corpsman (there is an enlisted specialty called operating room technician, not covered in this survey, that is separate from the medical service corpsman specialty).

Figure 2 shows the average task difficulty ratings for tasks performed by nurse and medical service corpsman plotted against time in service. Although the data was not longitudinal, (i.e., collected over the 30-year period), it is felt that the projection across time based on discrete sampling does provide insight into the growth that is present in each career field. Notice in Figure 2, that the nurses initially perform relatively more difficult tasks than the medical service corpsmen. The difference, however, decreases between the seventh and 10th year of service, as the medical service corpsmen perform increasingly more difficult tasks and the nurses perform tasks at about the same level of difficulty. The apparent reason for this is two-fold. First, the medical service corpsmen do, in fact, have an effective on-the-job training program that teaches them the more difficult tasks as they stay in the service. Secondly, medical service corpsmen are given relatively more administrative and supervisory responsibility, and these tasks are typically rated as the more difficult tasks. It must be remembered that this sample is restricted to the staff nurse specialty and that there is a separate career field called administrative nurse that performs the supervisory and administrative tasks which parallels many of the medical service administrative and supervisory tasks. Previous research done by this laboratory (Mead, 1970; Mead & Christal, 1970) has found that job difficulty does in fact consist of more than just the average difficulty of tasks. This research developed a linear model that predicted job difficulty indices based on the average difficulty of tasks performed and the number of tasks performed. The job difficulty index was computed for the nurse and

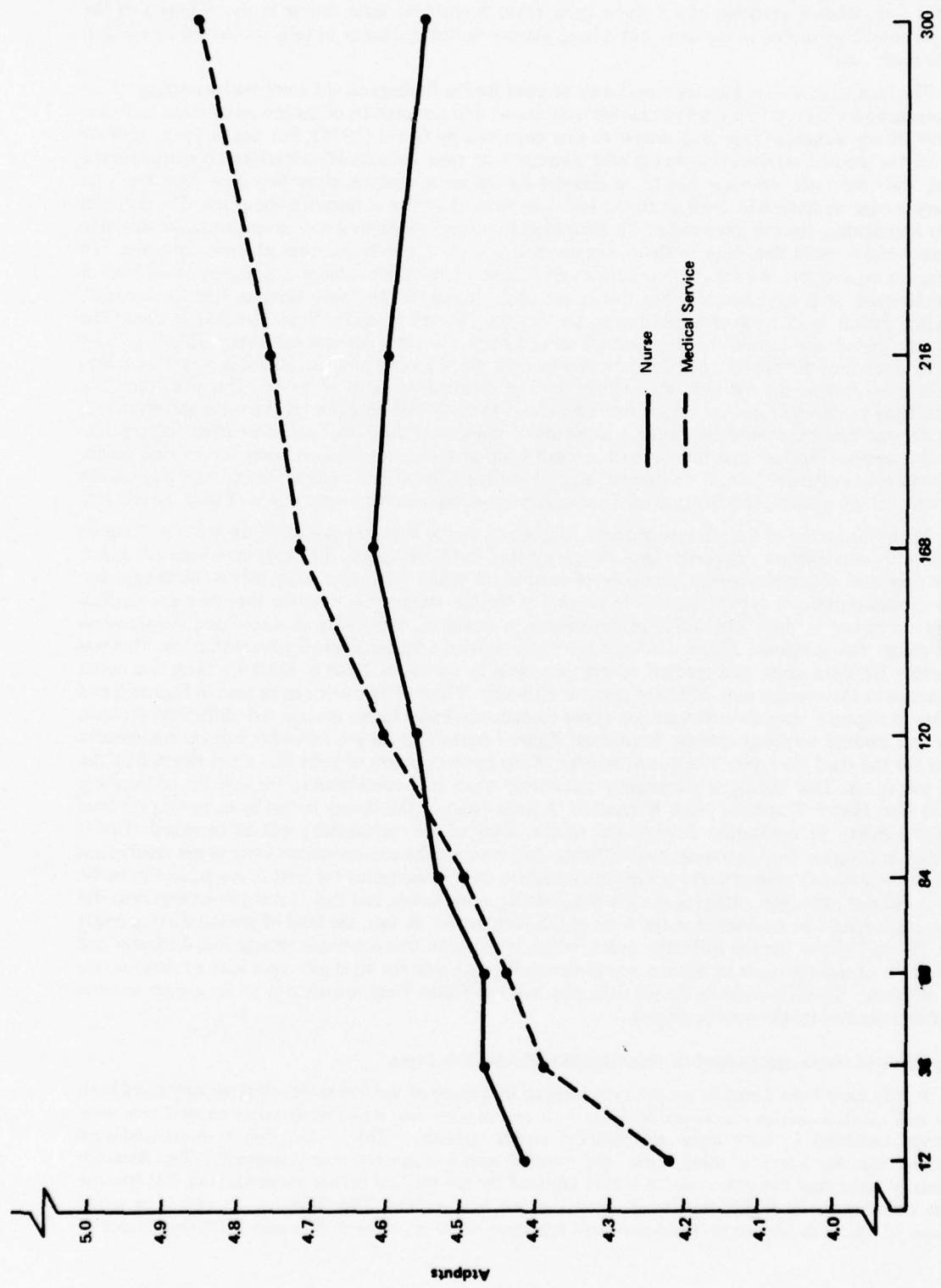


Figure 2. Average task difficulty for nurse and medical service companion over time.

medical service corpsman sample and results are given in Figure 3. The index is standardized and has a mean of 13.0 and standard deviation of 4.5. Here again, there is relatively little change in the difficulty of the jobs performed by nurses across time, but a large increase in the difficulty of jobs performed by medical service corpsmen.

This lack of growth in jobs for nurses may account for the findings on the comparative analysis of the job satisfaction variables (job interest and felt utilization). For the analysis of the job satisfaction variables, a curve fitting technique was used similar to that described by Gould (1976). For this analysis, aptitude level for the medical service corpsman is held constant over time and education level held constant for the nurses. Also the basic technique had to be changed for the nurse analysis, since they have only two year military service obligation in contrast to the four year medical service corpsman's obligation. The resultant curves representing the job interest and felt utilization for nurse and medical service corpsman are shown in Figures 4 and 5. Note that prior to the career decision point (48 months for medical service corpsmen, 24 months for nurses) that the nurses show a substantially lower level of job interest and slightly lower level of felt utilization. It is hypothesized that this is partially a result of the nurse being unable to see much potential growth in the job if a decision to stay in the military is made. Note also that at about the 24-month period the curves for the medical service corpsman show an upward swing. This is at least partially a result of the opportunity for early reenlistment. Once a nurse or medical service corpsman makes a decision to stay in the military, the relative level of satisfaction tends to go up. This is a form of a self-fulfilling prophecy. Also, the jumps that are present at the 24-month point for the nurse and 48-month point for the medical service corpsman, are results of the loss of those that are dissatisfied and separate from the service. The fact that there is such a small jump at the career decision point for medical service corpsman may in part be related to the task and job difficulty data. The medical service corpsman can see the potential job growth, and this potential has an impact on the perceived satisfaction of their current job.

In the discussion of the job type analysis, it becomes readily apparent that all of the job types may be broken into two distinct categories. One category being ward job types, the other non-ward job types. These non-ward job types consist primarily of out-patient clinics with emergency rooms, education, and some administrative job types included. In looking at the job satisfaction variables for nurse and medical service corpsman in these two different environments, (ward vs. non-ward) an interesting phenomenon takes place. The personnel in the non-ward job types showed a higher level of job satisfaction. This was consistent for both nurse and medical service personnel as shown in Table 8. Similarly there was noted differences in the average task difficulty and job difficulty. These differences can be seen in Figures 6 and 7. Note in Figure 6 that the non-ward job types consistently had a higher average task difficulty, for both nurse and medical service corpsman. In contrast Figure 7 shows that the job difficulty index is consistently higher for the ward job types. This occurs because of the greater number of tasks that are performed by the ward job types. This finding is particularly interesting when it is considered in the context of Herzberg (1966) *Two Factor Theory of Work Motivation*. A basic tenet of this theory is that by increasing the level of responsibility (a motivation factor), the relative level of job satisfaction will be increased. This is reflected in Figure 6 for the average task difficulty and explains the commensurate jump in job satisfaction for the non-ward job types. Herzberg went on to explain that by increasing the level of responsibility in the job, he did not mean just enlarging the job (i.e., adding more tasks), and that if just job enlargement did occur, there would be no change in the level of job satisfaction. In fact, the level of job satisfaction might drop. Figure 7 shows the job difficulty index, which is an index that combines average task difficulty and the number of tasks performed. Since it was shown in Figure 6 that the ward job types have a lower average task difficulty, the differences in the job difficulty index in Figure 7 are entirely due to the greater number of tasks performed by the ward job types.

#### **Comparison of Nurse and Medical Service Corpsman Across Job Types**

It may have been noted in the job type analysis that many of the non-ward job types contained both nurse and medical service corpsman. In Table 6 it can be seen that virtually all major clusters that were non-ward consisted of both nurse and medical service corpsman. This means that in most non-ward functions, the Air Force is using nurse and medical service corpsman interchangeably. This does not necessarily mean that the nurse can be totally replaced by the medical service corpsman, but that because of the environment in which they work, their jobs are very similar. This does suggest that if an acute shortage of nurses should occur, these non-ward functions could continue, if necessary, with the absence of

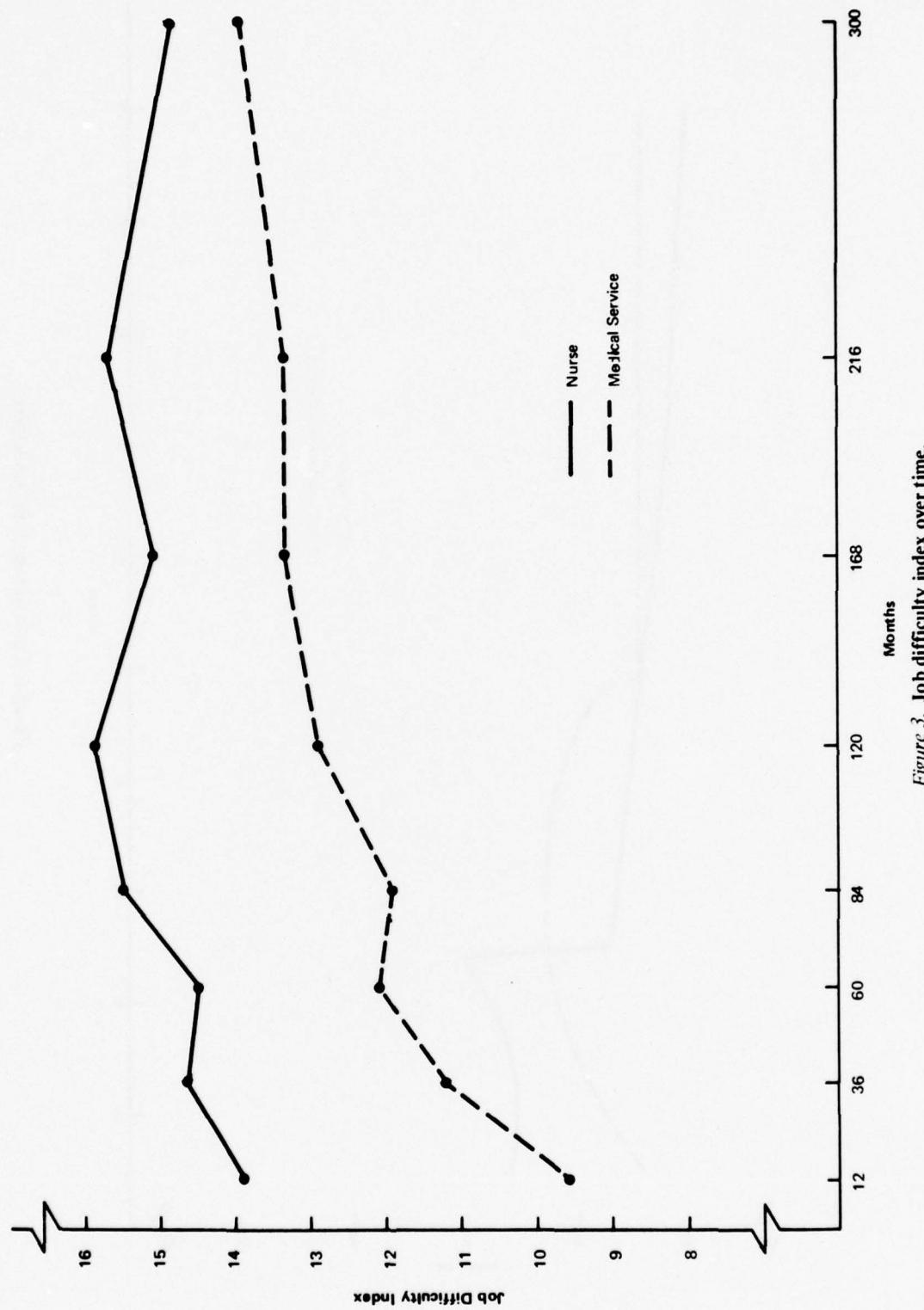


Figure 3. Job difficulty index over time.

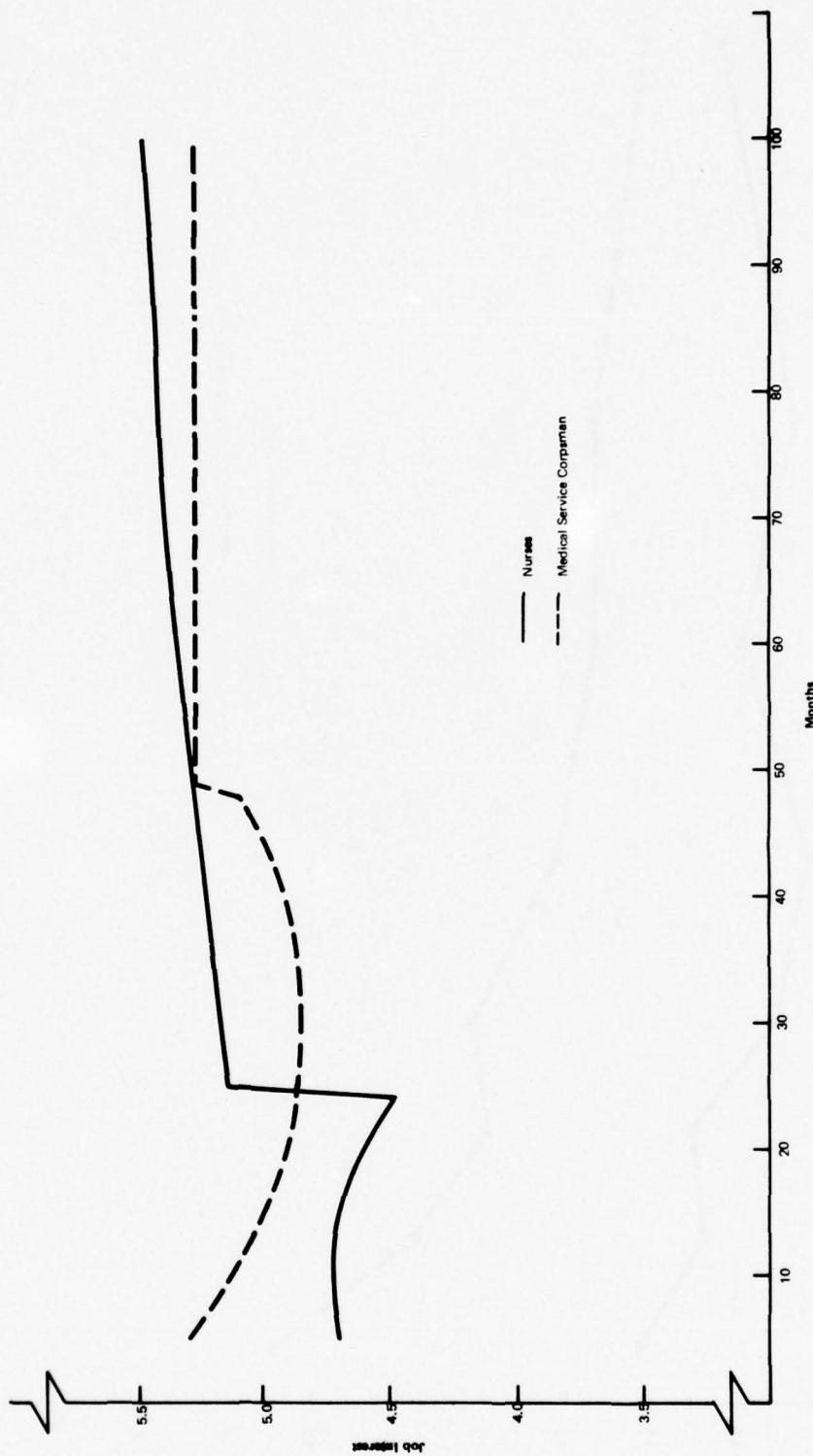


Figure 4. Curve of best fit for job interest.

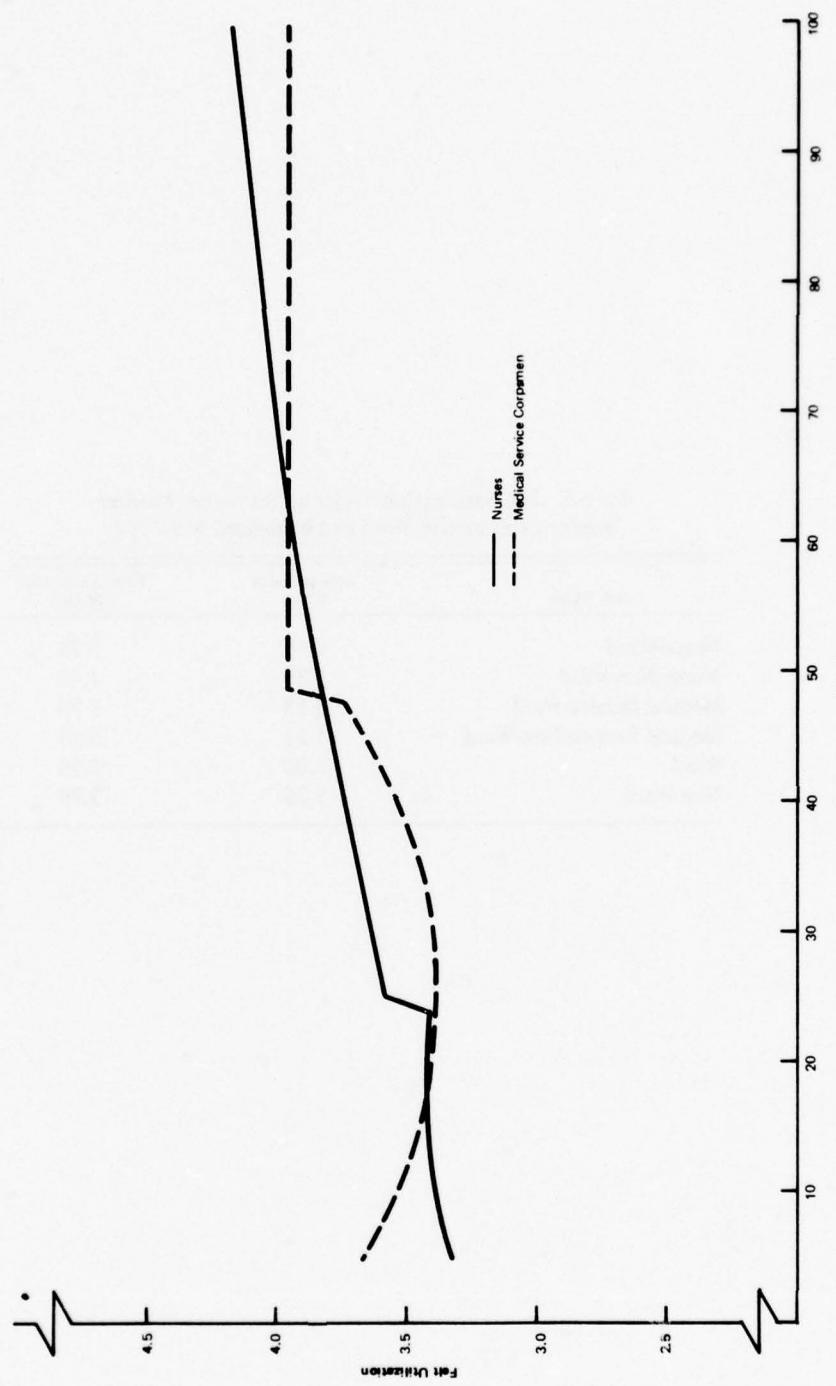


Figure 5. Curve of best fit for felt utilization.

*Table 8. Job Satisfaction Variables for Nurse, Medical Service Corpsman in Ward and Non-Ward Job Type*

Job Type	Job Interest Mean	Felt Utilization Mean
Nurse-Ward	4.95	3.78
Nurse-Non-Ward	5.39	4.10
Medical Service-Ward	5.13	3.70
Medical Service-Non-Ward	5.21	3.95
Ward	5.00	3.76
Non-Ward	5.26	3.99

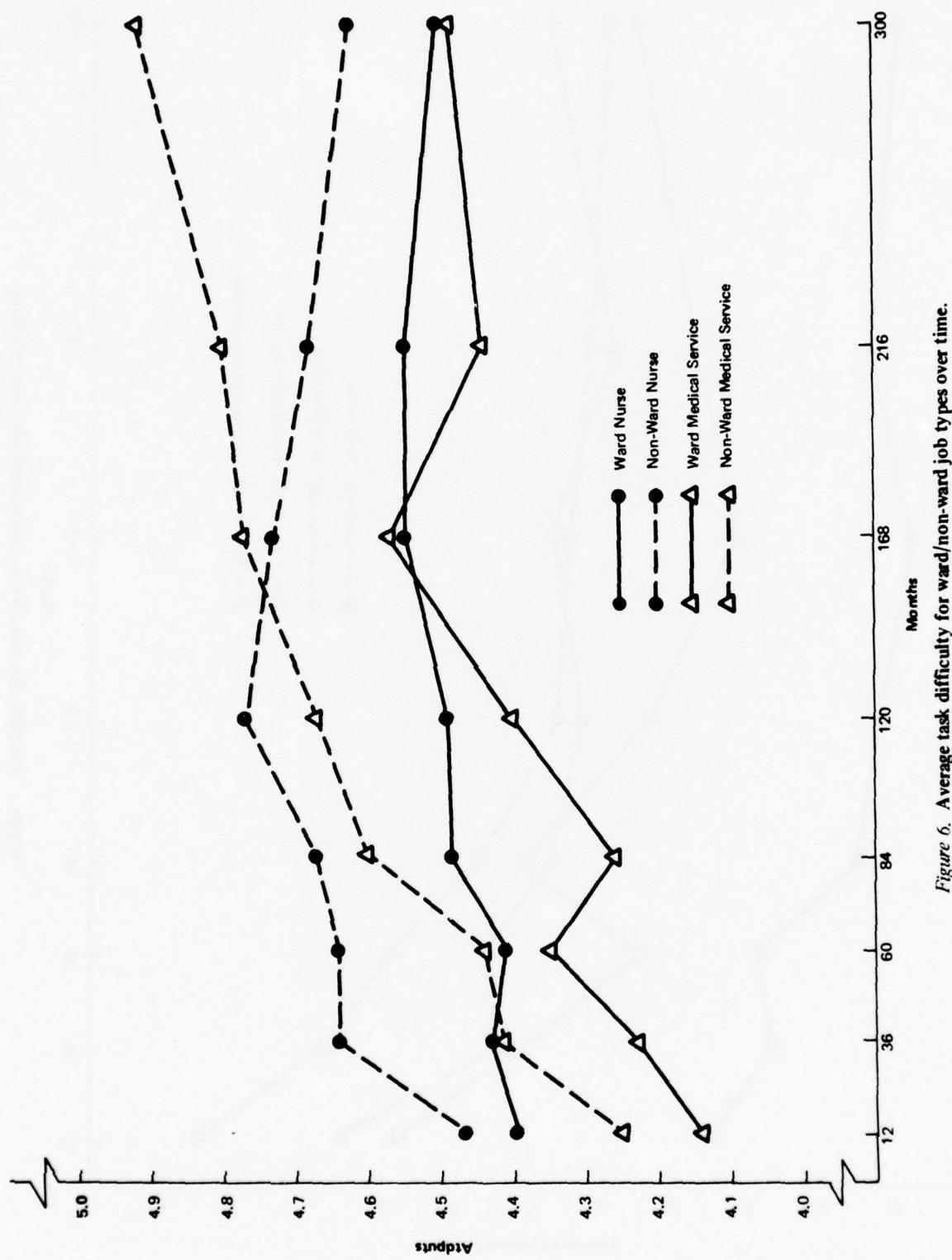


Figure 6. Average task difficulty for ward/non-ward job types over time.

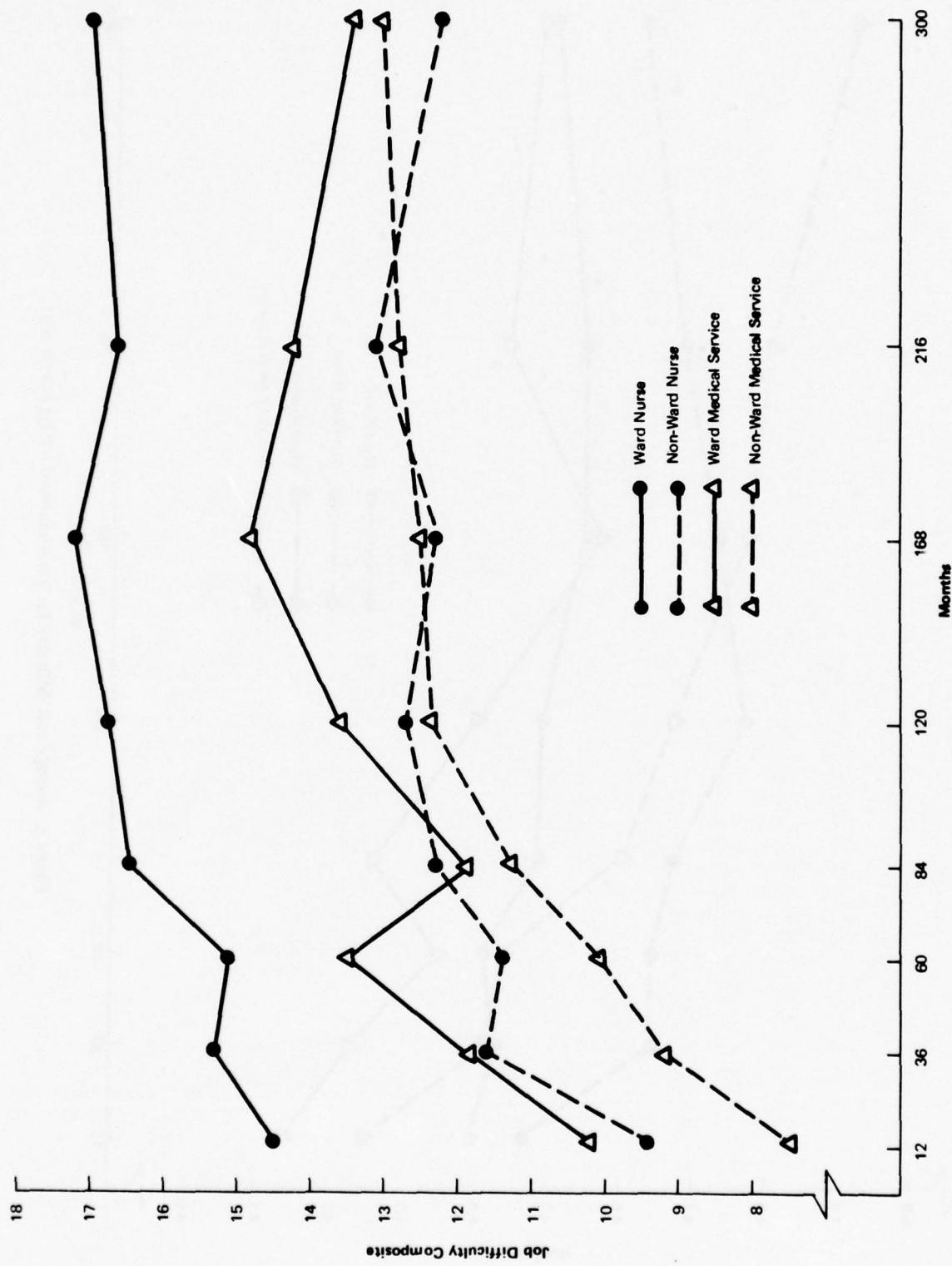


Figure 7. Job difficulty index for ward/non-ward job types over time.

the clinical nurse. In contrast the ward job types and clusters almost entirely segregated out the nurse and medical service corpsman (see Table 6). It was difficult to believe that the job type would divide into such completely segregated job types, since the nurse and medical service corpsman are working in the same environment and should have a very close interaction with one another. Thus, it was hypothesized that the differences between the two groups were not as great as indicated by the hierarchical grouping, and that similar tasks were performed by nurse and medical service personnel albeit their time spent on any given task might be considerably different. To test this hypothesis, the tasks were divided into task families. A task family was defined as a set of tasks such that if an individual performed any task in a family there was a higher probability that he would perform other tasks in that family than a task in another task family. Sixteen different tasks families were identified and the cumulative time spent on the tasks in each task family was computed. Table 9 shows the percent time spent for a select set of job types on the 16 task families. The job types were selected because of the similarity of duty titles for nurse and medical service corpsman. Inspection of the percent time spent for each of the job types shows the high degree of similarity between both nurse and medical service job types. Additionally, Table 10 shows a correlation matrix of the job types based upon the percent time spent in each task family. The values are exceedingly high demonstrating that the actual distribution of work done by the job types is very similar, although the time spent on an individual task may vary considerably. There were still a number of job types that are uniquely nursing job types for which no analogous medical service job type exists. These unique nursing job types were the intensive care job types (Groups 2234 and 1941), the coronary care job type (Group 1669), and the staff dispensary job type (Group 993).

#### IV. CONCLUSIONS AND RECOMMENDATIONS

From the results it is readily apparent that a great deal of similarity exist between a number of the nurse and medical service corpsman job types. This similarity, although most marked in the non-ward job types, also existed for the ward job types. This is not to imply that medical service corpsman can universally replace the clinical nurse. It does, however, indicate that should the scenario develop that the Air Force were unable to obtain sufficient nurses to fill many of these job types, the medical service corpsman would be able to fill-in with a minimal loss in the quality of patient care. This similarity has further implications that are important for the formulation of future personnel plans. For example, if the Air Force determines that nurses are capable of performing specialized functions such as pediatric nurse practitioners or nurse mid-wives, the nursing personnel resource pool may be extensively used for these functions, with the medical service corpsman filling the gap left by the nurses with minimal degradation in patient care.

Implied by the comparative average task difficulty of tasks performed by ward and non-ward job types is that both nurse and medical service corpsman are capable of performing more responsible tasks on the wards. If the nurse and medical service corpsman can perform tasks of a given difficulty level in the non-ward environment, it follows that they should be able to perform equally difficult tasks on the ward. In an unpublished study conducted by Spurlin, in 1974, an experimental program was set up on one ward in an Air Force medical center in which both nurse and medical service corpsman were given increased responsibility. The results of this study showed that dramatic increases in the average difficulty of tasks performed by both nurse and medical service corpsman were made. Increases were also noted in the level of job satisfaction reported by both nurse and medical service personnel and perhaps most important, the patients reported increased satisfaction with the quality of patient care they were receiving. This study was especially dramatic in that it showed what could be accomplished by providing both nurse and medical service corpsman with a challenging job in which all were actively involved.

In the area of job satisfaction there appears to be some problem among those personnel assigned to wards. Job satisfaction is a difficult and multifaceted concept. It is extremely difficult to provide definitive solutions where problems are identified. In the results, it has already been shown that there appears to be an interaction between job satisfaction, task difficulty, and number of tasks performed. As mentioned earlier, Herzberg has a theory that provides for some explanation of this finding. Yet, the theory does not give a clear solution for improving the level of job satisfaction since it is assumed that all of the tasks currently performed are in fact necessary and can not be eliminated, (i.e., bed pans must still be emptied,

Table 9. Time Spent in Task Families for Select Ward Job Types

Task Family	Medicine/Surgery						Supervisors						OB			
	2489 Med/Surg	1857 Med/Surg	1324 Staff Surg	1125 Shift Leaders	660 Gen Duty	1511 Med Surg	1635 Charge	1685 NCO	1089 NCOIC	451 OB	1163 OB	797 Staff OB	407 OB	462 NCCIC-OB		
Management	4.29	2.89	2.27	5.15	1.80	2.37	12.83	14.05	14.74	17.17	9.61	2.34	3.83	18.46		
General Nursing	23.26	27.46	32.69	16.02	24.48	22.05	15.69	22.31	16.86	17.32	22.58	30.31	20.41	14.91		
Ward Administration	21.72	25.21	27.63	17.29	33.05	27.64	14.47	17.69	18.12	19.66	17.57	22.41	20.15	10.34		
OB	3.61	3.96	3.53	1.91	1.10	1.30	3.46	3.01	1.14	1.29	8.54	10.59	10.75	9.79		
Supply	.17	.06	.03	.86	.12	.34	1.10	.59	1.50	1.40	.69	.07	1.04	2.82		
Surgery - Ward	4.00	4.00	3.70	4.22	1.31	1.92	4.54	3.18	1.87	1.59	5.73	6.29	9.50	7.83		
Anesthesia	.45	.41	.37	1.45	.15	.31	.96	.46	.25	.14	1.72	1.49	1.61	.100		
Sick Call	.75	.50	.34	3.37	.70	.82	2.41	.69	1.13	.89	1.09	.71	.92	.56		
Aeromedical	.57	.30	.21	1.00	.62	.25	1.21	.29	.52	.46	.22	.11	.09	.49		
Education	.30	.19	.23	.96	.13	.37	2.32	1.08	2.38	2.46	.93	.25	.50	2.57		
Job Training	6.45	5.79	5.76	4.85	3.27	3.98	6.47	10.20	9.30	12.63	7.97	4.56	5.62	12.75		
Operating	4.43	4.16	3.30	4.19	1.33	3.18	3.91	3.52	2.78	1.30	3.64	3.72	2.38	1.42		
Irrigation	2.82	2.53	1.84	3.93	3.12	4.25	2.46	1.62	2.83	1.65	.92	.64	1.52	.47		
Intensive Care	1.88	1.55	.84	3.60	1.23	2.58	2.62	1.79	2.50	1.12	.92	.50	.97	.99		
Orthopedics	2.49	1.37	1.30	4.01	1.68	2.23	3.04	1.52	2.26	1.39	.42	.25	.59	.20		
Other	2.73	2.36	1.11	4.27	2.53	3.41	3.39	1.91	2.99	1.73	1.06	.71	1.80	.68		

Table 10. Intercorrelation Matrix for Select Ward Job Types

Job Type	Medicine/Surgery						Supervisors						OB		
	2489 Med/Surg	1857 Med/Surg	1324 Staff Surg	1125 Shift Leaders	660 Gen Duty	1511 Med/Surg	1835 Charge	1685 NCO	1089 NCOIC	451 OB	1163 Staff OB	797 OB	407 OB	462 NCOIC-OB	
2489 - Medical/Surgical	1.000														
1857 - Medical/Surgical	.997	1.000													
1324 - Staff Surgical	.992	.997	1.000												
1125 - Shift Leaders	.978	.971	.960	1.000											
660 - General Duty	.961	.966	.959	.967	1.000										
1511 - Medical/Surgical	.972	.974	.965	.979	.996	1.000									
1835 - Charge	.859	.849	.887	.814	.825	.825	1.000								
1685 - Charge	.911	.888	.884	.888	.824	.837	.983	1.000							
1089 - NCO	.863	.834	.824	.871	.818	.828	.977	.974	1.000						
451 - NCOIC	.816	.784	.775	.814	.767	.771	.955	.960	.989	1.000					
1163 - OB	.938	.930	.928	.883	.847	.854	.928	.952	.881	.864	1.000				
797 - Staff OB	.956	.966	.970	.895	.892	.897	.814	.849	.752	.710	.952	1.000			
407 - OB	.927	.932	.925	.873	.875	.874	.812	.828	.748	.721	.946	.969	1.000		
462 - NCOIC - OB	.602	.569	.563	.540	.462	.467	.830	.834	.801	.846	.814	.615	.673	1.000	

supplies inventoried). It is no doubt desirable to enrich the jobs of those nurse and medical service corpsman assigned to the ward job types, but this is not something that can be accomplished by regulation. To effectively enrich the job of both nurse and medical service corpsman would require the active involvement of not only the nurse and medical service corpsman, but also the physicians and all hospital administrative personnel. One promising approach that might provide the medium by which this job enrichment could occur is the ward management concept. Under this concept each ward is an autonomous entity within which each individual is given specific objectives he is to achieve. These objectives are predefined in agreement with each individual and must provide an effective challenge to the individual to meet the objectives. The ward management concept is not a panacea, but if the individuals are willing to make a concerted effort, it is a technique that might work to improve the Air Force's health care delivery system.

In a period of critical physician shortages, it appears that the Air Force has the resources available in the nurse and medical service corpsman to fill some of the gaps resulting from the shortage by increasing and expanding programs such as the physician assistant's program and the nurse practitioner programs. This study clearly has implications that show that both the nurse and medical service corpsman are ready to meet this need.

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*APPENDIX A: TASKS INCLUDED IN JOB INVENTORY*

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UNITED STATES AIR FORCE  
JOB INVENTORY

## JOB INVENTORY OF JOBS IN THE MEDICAL AND CLINICAL SERVICE

## A ADMINISTRATIVE FUNCTIONS

- A 1 ADVISE REGISTRAR OR PATIENTS WHO HAVE NOT RETURNED FROM LEAVE OR PASS (1)
- A 2 ANSWER TELEPHONE CALLS FOR OR FROM PATIENTS OR HOSPITAL STAFF MEMBERS (2)
- A 3 ASSIST UNION PROFESSIONAL NURSE SERVICE (90240 OR 90222) PERSONNEL TO UNITS (1)
- A 4 ASSIST IN PLANNING THE PHYSICAL LAYOUT OF MEDICAL SERVICE FACILITIES (4)
- A 5 ASSIST IN PREPARATION, CLASSIFICATION AND CLASSIFICATION OF UNIVERSAL PATIENTS OR RECORDS (5)
- A 6 ASSIST PATIENTS IN PLACING TELEPHONE CALLS (6)
- A 7 BRIFEL FAMILY OR CONDITION OF PATIENTS (7)
- A 8 BRIFEL OR ASSIST PATIENTS ENDOWED WITH MATTERS SUCH AS ORDERS, TRANSPORTATION, JR REST, STATE OF JOURNEY (8)
- A 9 CALL ELIMINATE, DRAFT OR CHAPLAIN FOR PATIENT OR FAMILY (9)
- A 10 CHARGE FOR FEE OR OTHER IN MEDICAL INVESTIGATORY PERSONNEL (10)
- A 11 CONDUCT INSPECTIONS OF HARDS IN OTHER AREAS WHERE (NURSING) MEDICAL SERVICE PERSONNEL ARE EMPLOYED (11)
- A 12 CHECK OFF COMPLETED PATIENT CIRCUMSTANCES TO INSURE COMPLIANCE WITH PHYSICIANS' ORDERS (12)
- A 13 COLLECT OR MAINTAIN HEALTH-RELATED STATISTICS (13)
- A 14 CONDUCT INSPECTIONS OF HARDS IN OTHER AREAS WHERE MEDICAL SERVICE PERSONNEL ARE EMPLOYED (14)
- A 15 CONDUCT OR COORDINATE HOSPITAL TOURS (15)
- A 16 CONDUCT STAFF MEETINGS (16)
- A 17 COORDINATE MULTIDISCIPLINARY SUPERVISOR ON NURSING CARE CAPABILITY OF WARD OR SECTION (17)
- A 18 COORDINATE WORK ACTIVITIES WITH PHYSICIAN REGARDING PATIENT CARE (18)
- A 19 COORDINATE WITH LABORATORY (LOGIC) REGARDING ADMINISTRATIVE MATTERS (19)
- A 20 COORDINATE WITH LABORATORY (LOGIC) REGARDING PATIENT CARE (20)
- A 21 COORDINATE WORK ACTIVITIES WITH OTHER SECTIONS (21)
- A 22 COUSSEL INDIVIDUALS OR CAREER PROGRESSION OPPORTUNITIES (22)
- A 23 COUSSEL PERSONNEL ON PERSONAL PROBLEMS (23)
- A 24 COUSSEL PERSONNEL ON PROFESSIONAL PERFORMANCE EVALUATIONS OR PERFORMANCE STANDARDS (24)
- A 25 DESIGN ORGANIZATIONAL CHARTS (25)
- A 26 DETERMINE OR EVALUATE SUPPLY OR EQUIPMENT REQUIREMENTS ABOVE WARD OR SECTION LEVEL (26)
- A 27 DETERMINE OR EVALUATE SUPPLY OR EQUIPMENT REQUIREMENTS AT WARD OR SECTION LEVEL (27)

40

- A 28 DETERMINE PERSONNEL REQUIREMENTS (28)
- A 29 DETERMINE WORK PRIORITIES (29)
- A 30 DEVELOP OR IMPROVE WORK METHODS OR PROCEDURES (30)
- A 31 DEVELOP OR MAINTAIN A PLAN TO EVALUATE THE CARE THEY RECEIVE (31)
- A 32 DIRECT OR SUPERVISE HOUSEKEEPING ACTIVITIES (32)
- A 33 DIRECT OR SUPERVISE THE ADMINISTRATION OF DRUGS (33)
- A 34 DIRECT OR SUPERVISE THE ADMINISTRATION OF PERFORMANCE OR EFFICIENCY RATINGS ON SUBORDINATES (34)
- A 35 DIRECT OR SUPERVISE THE UTILIZATION OF EQUIPMENT AND SUPPLIES (35)
- A 36 DISTRIBUTE ADMINISTRATIVE COMMUNICATIONS (36)
- A 37 DRAFT BUDGET ESTIMATES (37)
- A 38 DRAFT OR REVISE JOB DESCRIPTIONS (38)
- A 39 DRAFT RECOMMENDATIONS FOR REVISIONS TO MANUALS, TECHNICAL PUBLICATIONS OR SOP'S (39)
- A 40 ESTABLISH LEAVE POLICY (40)
- A 41 ESTABLISH SANITATION PROCEDURES (41)
- A 42 EVALUATE DUTY PERFORMANCE OF (NURSING) MEDICAL SERVICE PERSONNEL (42)
- A 43 EVALUATE PROCEDURES FOR STORAGE, INVENTORY OR INSPECTION OF PROPERTY ITEMS (43)
- A 44 EVALUATE SKILL LEVEL OF ASSIGNED (NURSING) MEDICAL SERVICE PERSONNEL (44)
- A 45 EVALUATE THE PREPARATION OF (NURSING) PATIENT CARE RECORDS OR REPORTS (45)
- A 46 EVALUATE THE QUALITY OF PATIENT CARE (46)
- A 47 EVALUATE THE UTILIZATION OF WORK AREAS OR SPACE (47)
- A 48 EVALUATE TIME SCHEDULES FOR WARD COVERAGE AND COORDINATE ADJUSTMENTS (48)
- A 49 EVALUATE UTILIZATION OF (NURSING STAFF) MEDICAL SERVICE PERSONNEL (49)
- A 50 FORMULATE LOCAL HOSPITAL, DISPENSARY OR NURSING INSTRUCTIONS (HOS), DOIS, DOIS OR NUS'S (50)
- A 51 GUIDE SUBORDINATES IN MAINTAINING FAVORABLE INTERPERSONAL RELATIONSHIPS WITH OTHER HEALTH TEAM MEMBERS (51)
- A 52 GUIDE SUBORDINATES IN MAINTAINING FAVORABLE INTERPERSONAL RELATIONSHIPS WITH PATIENTS (52)
- A 53 IDENTIFY AND RESOLVE BED-CENSUS PROBLEMS (53)
- A 54 INITIATE DISCIPLINARY OR CORRECTIVE PERSONNEL PROCEDURES (54)
- A 55 INITIATE REFERRAL FOR THIRD-PARTY LIABILITY (55)
- A 56 INITIATE REQUESTS FOR PERSONNEL REPLACEMENTS (56)
- A 57 INITIATE REQUESTS FOR PURCHASE OF EQUIPMENT (57)
- A 58 INITIATE REQUESTS FOR REPAIR OR MAINTENANCE OF EQUIPMENT (58)

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## JOB INVENTORY/TASK TITLES)

## JOHINV PAGE 2

- A 59 INITIATE REQUESTS TO CENTRAL STERILE SUPPLY (59)  
 A 60 INSPECT AND EVALUATE EQUIPMENT STANDARDS OF SANITATION,  
 CLEANLINESS AND SAFETY (60)  
 A 61 INTERVIEW ADMINISTRATIVE POLICIES OR PROCEDURES TO  
 PATIENTS, VISITORS OR PERSONNEL (61)  
 A 62 INTERVIEW CIVILIAN JOB APPLICANTS (62)  
 A 63 INTERVIEW SALESMAN (63)  
 A 64 INVENTORY EQUIPMENT (64)  
 A 65 INVENTORY SUPPLIES (65)  
 A 66 LABEL SPECIMENS TO FILL OUT LABORATORY SPECIMEN REQUEST  
 FORMS (66)
- A 67 MAINTAIN A UNIT, MAINTAIN OR SECTION LIBRARY (67)  
 A 68 MAINTAIN BULLETINS, NEWSLETTERS OR PUBLICATIONS (68)
- A 69 MAINTAIN FILE OF LABORATORY, X-RAY OR CONSULTATION  
 REPORTS (69)
- A 70 MAINTAIN PREVENTIVE MEDICINE RECORDS OR REPORTS (70)
- A 71 MAINTAIN MAINTAIN OR SECTION SUPPLY OR EQUIPMENT LEVELS (71)
- A 72 MEDIATE INTERPERSONAL RELATIONSHIPS BETWEEN PATIENTS AND  
 PHYSICIANS (72)
- A 73 MEET WITH HEALTH TEAM MEMBERS OTHER THAN NURSES TO PLAN  
 FOR TOTAL PATIENT CARE (73)
- A 74 MEET WITH (OTHER) NURSES TO PLAN TOTAL PATIENT CARE (74)
- A 75 MONITOR HUMAN RELIABILITY PROGRAM (75)
- A 76 MONITOR REPRODUCTIVE STERILIZATION REPORTS (76)
- A 77 NOTIFY PHYSICIANS OF OUTDATED ORDERS (77)
- A 78 NOTIFY PHYSICIANS OF PATIENT ARRIVALS AND STATUS (78)
- A 79 ORDER OR COORDINATE PATIENT DIETS WITH FOOD SERVICE (79)
- A 80 ORGANIZE ENTERTAINMENT OR SOCIAL EVENTS (80)
- A 81 ORIENT NEW PATIENTS TO HOSPITAL RULES AND FACILITIES (81)
- A 82 ORIENT VISITORS TO HOSPITAL (82)
- A 83 PARTICIPATE AS A MEMBER OF NURSING SERVICE OR STANDING  
 HOSPITAL COMMITTEE (83)
- A 84 PARTICIPATE IN AIR FORCE RETENTION PROGRAM (84)
- A 85 PARTICIPATE IN STAFF MEETINGS (85)
- A 86 PERFORM ADMINISTRATIVE-DUTY DUTIES (86)
- A 87 PERFORM AS NURSING CONSULTANT (87)
- A 88 PERFORM PATIENT NURSING-RECORDS AUDIT (88)
- A 89 PERFORM STAFF OR LIAISON VISITS (89)
- A 90 PLAN CAREER DEVELOPMENT ASSIGNMENTS FOR PERSONNEL (90)
- A 91 PLAN OR COORDINATE LAUNDRY CONTROL MEASURES (91)
- A 92 PLAN OR MONITOR PROGRAMS FOR DETECTING DISEASE-PRODUCING  
 ORGANISMS IN PATIENTS ENVIRONMENT (92)
- A 93 PLAN OR SCHEDULE WORK ASSIGNMENTS FOR PERSONNEL (93)
- A 94 PLAN PHYSICAL THERAPY REGIMENT FOR PATIENTS IN THE ABSENCE  
 OF THERAPIST (94)
- A 95 PLAN REPLACEMENT AND MOBILIZATION PROGRAM FOR SUPPLIES  
 AND EQUIPMENT (95)
- A 96 PLAN STATUS MARKS OR CHAINS (96)
- A 97 PLAN UNIT SAFETY OR SECURITY PROGRAMS (97)
- A 98 PREPARE AND ATTACH EMERGENCY TICKET, MOUNTED OR  
 DEATH TAGS (98)
- A 99 PREPARE CIVILIAN PERFORMANCE RATINGS (99)
- A100 PREPARE CIVILIAN TIME CARDS (100)
- A101 PREPARE CONSULTATION REQUESTS OR LAB SLIPS (101)
- A102 PREPARE FORMS FOR PATIENT LEAVES, PASSES OR INTERWARD  
 TRANSFERS (102)
- A103 PREPARE INPATIENT I.D. BANDS (OTHER THAN INFANT) (103)
- A104 PREPARE OFFICIAL CORRESPONDENCE (104)
- A105 PREPARE OR ENDURE AIRMAN PERFORMANCE REPORTS (105)
- A106 PREPARE OR MAINTAIN INPATIENT RECORDS (106)
- A107 PREPARE OR MAINTAIN OUTPATIENT RECORDS (107)
- A108 PREPARE OR PROCESS PERSONNEL LEAVE APPLICATIONS (108)
- A109 PREPARE OR SUBMIT REPORTS OF TREATMENT (109)
- A110 PREPARE RECOMMENDATIONS FOR SPECIAL AWARDS (110)
- A111 PREPARE RECOMMENDATIONS FOR SPECIAL CORRECTIVE ACTION IN  
 CASE OF RECURRING PROBLEMS (111)
- A112 PREPARE SPECIAL INCIDENT REPORTS (112)
- A113 PREPARE TIME SCHEDULES FOR PERSONNEL (113)
- A114 PREPARE UNIT RECORDS, GRAPHS, REPORTS OR STUDIES (114)
- A115 PROVIDE SUPERVISORY ORIENTATION OF NEWLY ASSIGNED  
 PERSONNEL (115)
- A116 READ PROFESSIONAL NURSING JOURNALS AND PUBLICATIONS (116)
- A117 RECEIVE AND DELIVER MAIL, MESSAGES OR PERSONAL ITEMS FOR  
 PATIENTS (117)
- A118 RECOVERY PHYSICIANS' ORDERS (118)
- A119 REFER PATIENTS TO OUTPATIENT CLINIC (119)
- A120 REQUISITION LAUNDRY SUPPLIES OR LINEN (120)
- A121 RESOLVE EMERGENCY STAFFING PROBLEMS (121)
- A122 REVIEW OR REFER COMPLAINTS OF PATIENTS, PERSONNEL OR  
 VISITORS (122)
- A123 RESOLVE PERSONNEL PROBLEMS, INCIDENTS OR DISCIPLINARY  
 MATTERS (123)
- A124 REVIEW MANAGING DOCUMENTS AND SUBMIT RECOMMENDATIONS FOR  
 CHANGE (124)
- A125 REVIEW PERFORMANCE OR EFFICIENCY REPORTS (125)
- A126 REVIEW SPECIAL INCIDENT REPORTS (126)
- A127 REVIEW SUGGESTIONS AND FORWARD FOR OFFICIAL  
 CONSIDERATION (127)
- A128 SCHEDULE AND COORDINATE LEAVES OR PASSES (128)
- A129 SCHEDULE DIAGNOSTIC TESTS, CONSULTATIONS OR SPECIAL  
 PROCEDURES WITH APPROPRIATE DEPARTMENTS (129)
- A130 SCREEN SOLICITATIONS OR ADVERTISING MATERIALS (130)
- A131 SERVE AS A MEMBER OF INFECTION CONTROL COMMITTEE (131)
- A132 SERVE ON INSPECTION TEAM AT COMMAND LEVEL OR ABOVE (132)
- A133 SOLICIT VOLUNTEERS FOR HOSPITAL OR CLINIC WORK (133)
- A134 SUPERVISE AIRMEN OTHER THAN (902XX) (902XX)'S OR  
 902XX'S (134)
- A135 SUPERVISE CIVILIAN ADMINISTRATIVE OR CLERICAL SUPPORT  
 PERSONNEL (135)
- A136 SUPERVISE CIVILIAN AUXILIARY NURSING PERSONNEL (136)
- A137 SUPERVISE CIVILIAN HOUSEKEEPING PERSONNEL (137)
- A138 SUPERVISE CIVILIAN MAINTENANCE PERSONNEL (138)
- A139 SUPERVISE MILITARY ADMINISTRATIVE OR CLERICAL SUPPORT  
 PERSONNEL (139)

# BEST AVAILABLE COPY

JUDIETH PAGE 3

- A140 SUPERVISE PHYSICAL EDUCATION, GYMNASIUMS (140)
- A141 SUPERVISE THE CLASSROOM, CLASSROOM PROJECTS, FOR THAT SECTION OR FACILITY (141)
- A142 SUPERVISE THE INDIVIDUALS IN THE CLASSROOM, INDIVIDUALS IN THE AMUSEMENT OF DISTRICTS (142)
- A143 SUPERVISE THE PERSONNEL OF CAFES FOR PATIENTS (143)
- A144 SUPERVISE THE SERVING OF FOOD TO PATIENTS (144)
- A145 SUPERVISE POLICE OR POLICE PERSONNEL (145)
- A146 WITNESS PATIENT, PATIENT OR GUARDIAN SIGNATURES OR LEGAL DOCUMENTS SUCH AS OPERATIVE REPORTS (146)
- A147 WORK WITH LOCAL CIVILIAN HEALTH AGENCIES IN PREVENTIVE MEDICINE PROGRAMS (147)
- A148 WRITE BULLETINS, ANNOUNCEMENTS OR PUBLICATIONS (148)
- A149 WRITE LETTERS AND MEMORANDA FOR PATIENTS (149)
- B. GENERAL NURSING**
- C. ACCOMPANY PATIENTS IN OUTSIDE ACTIVITIES SUCH AS EDUCATIONAL TOURS OR ENTERTAINMENT EVENTS (150)**
- D. ACCOUNT FOR RECEIPTS OR CONTROLLED DRUGS (151)**
- E. ADMINISTER BED PAIDS OR COTPAIDS (152)**
- F. ADMINISTER BLADDER IRRIGATIONS (153)**
- G. ADMINISTER COLONSTOMY IRRIGATI-ES (154)**
- H. ADMINISTER COMPLETE BED BATHS (155)**
- I. ADMINISTER EAR DROPS (155)**
- J. ADMINISTER ENEMA IRRIGATIONS (157)**
- K. ADMINISTER EYES DROPS (158)**
- L. ADMINISTER EYE IRRIGATIONS (159)**
- M. ADMINISTER FIRST AID (160)**
- N. ADMINISTER NASAL IRRIGATIONS (162)**
- O. ADMINISTER INHALATION MEDICATIONS (163)**
- P. ADMINISTER INTRADERMAL MEDICATIONS (164)**
- Q. ADMINISTER INTRAMUSCULAR MEDICATIONS (165)**
- R. ADMINISTER INTRAVENOUS INFUSIONS (166)**
- S. ADMINISTER INTRAVENOUS MEDICATIONS (167)**
- T. ADMINISTER INTRAPLEURAL MEDICATIONS (168)**
- U. ADMINISTER MEDICATIONS RECTALLY (169)**
- V. ADMINISTER MEDICATIONS VAGINALLY (170)**
- W. ADMINISTER NARCOTICS (171)**
- X. ADMINISTER NASAL IRRIGATIONS (172)**
- Y. ADMINISTER NOSE DROPS (173)**
- Z. ADMINISTER ORAL MEDICATIONS (174)**
- A. ADMINISTER PARTIAL BED BATHS (175)**
- B. ADMINISTER SUBCUTANEOUS MEDICATIONS (176)**
- C. ADMINISTER SUBLINGUAL MEDICATIONS (177)**
- D. ADMINISTER THROAT IRRIGATIONS (178)**
- E. ADMINISTER TOPICAL MEDICATIONS (179)**
- F. ADMINISTER VAGINAL IRRIGATIONS (180)**
- G. ADMINISTER MOUTH IRRIGATIONS (181)**
- H. AMBULATE PATIENTS (182)**
- b 34 APPLY ABDOMINAL, BREAST OR T-BINDER (183)
- b 35 APPLY BANDAGES (184)
- b 36 APPLY JACKS EXTENSION (185)
- b 37 APPLY CASTS TO THE EXTREMITIES (186)
- b 38 APPLY CASTS TO THE THIGH OR PELVIC AREA SUCH AS SPIKA OR BODY CASTS (187)
- b 39 APPLY CERVICAL TRACTION (188)
- b 40 APPLY COLD BY ALCOHOL SPONGE (189)
- b 41 APPLY COLD BY ICE CAP OR COMPRESSES (190)
- b 42 APPLY COLD BY TUB BATH (191)
- b 43 APPLY HEAT BY CHAFING, HOT WATER BOTTLE OR COMPRESSES (192)
- b 44 APPLY HEAT BY ELECTRICAL HEATING PAD OR THERMAL BLANKET (193)
- b 45 APPLY HEAT BY K-PAD OR CHEMICAL HEATING PAD (194)
- b 46 APPLY HYPOOTHERMIA BLANKET (195)
- b 47 APPLY MECHANICAL RESTRAINTS TO PATIENTS (196)
- b 48 APPLY ORTHOPEDIC BRACES (197)
- b 49 APPLY SPLINTS (198)
- b 50 ARRANGE FURNITURE IN PATIENT'S ROOM (199)
- b 51 ASSEMBLE TRACTION EQUIPMENT OTHER THAN BALKIN FRAME (200)
- b 52 ASSIST IN OBTAINING PAP (PAPANICOLAOU) SMEAR (201)
- b 53 ASSIST IN PERFORMING CYSTOSCOPY (202)
- b 54 ASSIST IN PERFORMING PHOTOSCOPY (203)
- b 55 ASSIST PATIENT WITH POSTURAL DRAINAGE (204)
- b 56 ASSIST PATIENTS TO TURN, COUGH AND DEEP BREATHE (205)
- b 57 ASSIST PHYSICIAN IN MAKING DIFFERENTIAL DIAGNOSIS (206)
- b 58 ASSIST PHYSICIAN OR ANOTHER NURSE WITH INFANT DELIVERIES (207)
- b 59 ASSIST WITH BIOPSIES (208)
- b 60 ASSIST WITH BLOOD TRANSFUSIONS (209)
- b 61 ASSIST WITH CUTOWNS (210)
- b 62 ASSIST WITH SPINAL PUNCTURE (211)
- b 63 ASSIST WITH STERNAL PUNCTURE (212)
- b 64 ASSIST WITH THORACENTESIS OR PARACENTESIS (213)
- b 65 ASSIST WITH VAGINAL EXAMINATIONS (214)
- b 66 ATTACH OR ANCHOR DRAINAGE OR ADMINISTRATION TUBING (215)
- b 67 DIVALVE OR WINDOW CASTS (216)
- b 68 CARE FOR PATIENTS ON TURNING FRAMES OR CIRCLE ELECTRIC BEDS (217)
- b 69 CATHETERIZE PATIENTS (218)
- b 70 CHANGE DRESSINGS (219)
- b 71 CLEAN AND MAINTAIN EQUIPMENT (220)
- b 72 CLEAN DELIVERY OR OPERATING ROOM (221)
- b 73 CLEAN MINOR SURGERY OR EXAMINATION ROOMS (222)
- b 74 CLEAN PATIENT CARE UNIT (223)
- b 75 CLEAN NURSERY KITCHEN (224)
- b 76 CLEAN NURSERY UTILITY ROOM (225)
- b 77 COLLECT AND LABEL SPECIMENS SUCH AS URINE, FECES OR SPUTUM FROM PATIENTS (226)
- b 78 COLLECT FOOD TRAYS OR SERVING UNITS (227)
- b 79 COUNSEL PATIENTS ON MATTERS SUCH AS TREATMENTS, HOSPITAL DISCHARGE OR PERSONAL PROBLEMS (228)

## JOB INVENTORY(DUTY/TASK TITLES)

JOHINV PAGE 4

B 80	DELIVER BABY IN ABSENCE OF PHYSICIAN (229)	B124	PARTICIPATE IN INFORMAL UNSTRUCTURED DISCUSSIONS WITH PSYCHIATRIC PATIENTS (273)
B 81	DISPOSE OF CONTAMINATED MATERIALS (230)	B125	PARTICIPATE IN PATIENT RECREATIONAL ACTIVITIES IN WARD OR HOSPITAL SETTING (274)
B 82	DRAPE PATIENT FOR SURGICAL PROCEDURE (231)	B126	PARTICIPATE IN (PROFESSIONAL) (NURSING CARE) WORKSHOPS OR CONFERENCES (275)
B 83	DRAW BLOOD FOR LABORATORY TESTS (232)	B127	PARTICIPATE IN RECRUITING ACTIVITIES (276)
B 84	ESCORT PATIENTS IN AMBULANCE RUNS (233)	B128	PARTICIPATE IN TEAM CONFERENCES (277)
B 85	EXPLAIN AND APPLY SAFETY REGULATIONS IN CARING FOR PATIENTS (234)	B129	PERFORM DRUG INVENTORY (278)
B 86	EXPLAIN GENERAL SURGICAL PROCEDURES AND PROBABLE POSTOPERATIVE CONDITIONS TO PATIENTS (235)	B130	PERFORM EXTERNAL CARDIAC MASSAGE (279)
B 87	FEED INCAPACITATED PATIENTS (236)	B131	PERFORM GASTRIC GAVAGE (280)
B 88	FOLD OR COUNT LINEN (237)	B132	PERFORM GASTRIC LAVAGE (281)
B 89	GIVE ARTIFICIAL RESPIRATION (238)	B133	PERFORM GENERAL HOUSEKEEPING DUTIES (282)
B 90	GIVE BACK RUBS (239)	B134	PERFORM ISOLATION OR REVERSE ISOLATION TECHNIQUE (283)
B 91	GIVE COMPREHENSIVE SKIN CARE (240)	B135	PERFORM ORAL HYGIENE (284)
B 92	IDENTIFY CARE FOR POSTOPERATIVE HEMORRHAGE (241)	B136	PERFORM PATIENT ADMISSION, TRANSFER OR DISPOSITION PROCEDURES (285)
B 93	IDENTIFY PERSONAL OR EMOTIONAL PROBLEMS ON NEEDS OF PATIENTS (242)	B137	PERFORM POSTMORTEM CARE (286)
B 94	IDENTIFY REHABILITATION PROBLEMS OR NEEDS OF PATIENTS (243)	B138	PERFORM POSTOPERATIVE CARE (287)
B 95	INFORM PATIENTS AND RELATIVES OF COMMUNITY HEALTH RESOURCES (244)	B139	PERFORM PREOPERATIVE CARE (288)
B 96	INITIATE REQUESTS FOR DRUGS FROM PHARMACY (245)	B140	PERFORM RECTAL EXAMINATIONS (289)
B 97	INSERT NASO-GASTRIC TUBES (246)	B141	PERFORM SURGICAL SKIN PREPS ON PATIENTS PRIOR TO OPERATIVE PROCEDURES (290)
B 98	INSECT ORAL AIRWAY (247)	B142	PERFORM TERMINAL DISINFECTION PROCEDURES (291)
B 99	INSTRUCT PATIENTS IN CRUTCH WALKING (248)	B143	PERFORM THORACOTOMY (292)
B100	INSTRUCT PATIENTS ON LIMITATIONS FOLLOWING SURGERY (249)	B144	PERFORM ENDOTRACHEAL SUCTION (293)
B101	INTERPRET READINGS FROM ELECTRONIC MONITORING DEVICES SUCH AS CARDIAC MONITOR (250)	B145	PERFORM TRACHEOSTOMY CARE (294)
B102	Maintain or Discontinue Blood Transfusions (251)	B146	PERFORM TRIAGE IN A FIELD ENVIRONMENT (295)
B103	Maintain or Remove Oral Airways (252)	B147	PERFORM TRIAGE IN A MEDICAL FACILITY (296)
B104	MAKE BEDS OTHER THAN POSTOPERATIVE OR RECOVERY (253)	B148	PERFORM URINE TEST FOR SUGAR, ACETONE OR ALBUMIN (297)
B105	MAKE ENTRIES INWARD CARREXES (254)	B149	PERFORM VAGINAL EXAMINATIONS (298)
B106	MAKE POSTOPERATIVE OR RECOVERY BEDS (255)	B150	PREPARE AND MAINTAIN NURSING CARE PLANS (299)
B107	MAKE PRE OR POSTPARTAL VISITS TO EVALUATE CONDITION OF PATIENTS (256)	B151	PREPARE DRESSING TRAYS (300)
B108	MAKE REPAIRS TO PATIENT CARE UNIT OR TREATMENT FACILITY (257)	B152	PREPARE INFANT I.D. BANDS OR FOOTPRINTS (301)
B109	MAKE WARD ROUNDS ALONE (258)	B153	PREPARE PATIENT TO RECEIVE SACRAMENTS OR ASSIST IN THE ADMINISTRATION OF THE SACRAMENTS (302)
B110	MAKE WARD ROUNDS WITH (OTHER) WARD NURSES, SUPERVISORS OR CHIEF NURSE (259)	B154	PREPARE PATIENTS FOR AEROMEDICAL EVACUATION (303)
B111	MAKE WARD ROUNDS WITH PHYSICIANS (260)	B155	PREPARE PATIENTS FOR PHYSICIAN EXAMINATION OR TREATMENT (304)
B112	MEASURE AND RECORD INTAKE AND OUTPUT (261)	B156	PREPARE PATIENTS FOR SPECIAL DIAGNOSTIC OR TREATMENT PROCEDURES (305)
B113	MIX ALLERGY EXTRACTS (262)	B157	PREPARE PATIENTS PSYCHOLOGICALLY TO COPE WITH THEIR ILLNESSES (306)
B114	MONITOR INTRAVENOUS ADMINISTRATION (263)	B158	PREPARE PRESCRIBED MEDICATIONS (307)
B115	MONITOR MAINTENANCE OF ASEPTIC TECHNIQUE (264)	B159	PREVENT OR CARE FOR POSTPARTUM HEMORRHAGE (308)
B116	MONITOR THE PROGRESSES OF PATIENTS IN LABOR (265)	B160	PREVENT OR TREAT SHOCK (309)
B117	MONITOR THE QUALITY OF PATIENTS' DIETS (266)	B161	PROVIDE EMOTIONAL SUPPORT TO PATIENT FAMILIES (310)
B118	OBSERVE AND RECORD CONDITION OF PATIENTS (267)	B162	REINFORCE EMOTIONAL DRESSINGS (311)
B119	OBSERVE AND REPORT CHANGES IN CONDITION OF PATIENTS (268)	B163	REMOVE FECAL IMPACTS (312)
B120	OBTAIN BLOOD FROM BLOOD BANK (269)	B164	REMOVE PLASTER CASTS (313)
B121	OBTAİN PATIENT OR FAMILY CONSENT FOR TREATMENT (270)	B165	REVIEW INTERPRET LAB REPORTS AND REPORT FINDINGS TO PHYSICIAN (314)
B122	ORGANIZE OR RESTOCK INTRAVENOUS CART OR TRAY (271)		
B123	PAINT PATIENT SAME #REF! (272)		

# BEI AVAILABLE UNIT I

## JOB INVENTORY(DUTY/TASK TITLES)

JOB INV PAGE 5

B166	SCHEDULED DUTIES FOR CONVALESCING PATIENTS (315)	C 10 GOWN AND GLOVE PHYSICIAN OR OTHER SURGICAL TEAM MEMBERS (351)
B167	SERVE AS CHAPLAIN FOR MEDICAL EXAMINATION OR TREATMENT (316)	C 11 MAINTAIN RECORD OF SURGICAL PROCEDURES (352)
B168	SERVE BETWEEN-MEAL NOURISHMENT TO PATIENTS (317)	C 12 MAKE PRE OR POSTOPERATIVE VISITS FOR THE PURPOSE OF EVALUATING PATIENTS (353)
B169	SERVE PRESCRIBED DIETS TO PATIENTS (318)	C 13 MAKE UP INSTRUMENT SETS OR SURGICAL PACKS FOR DELIVERY ROOM PROCEDURES (354)
B170	SET UP AND REGULATE COUPETTE (319)	C 14 MAKE UP INSTRUMENT SETS OR SURGICAL PACKS FOR OPERATIVE PROCEDURES (355)
B171	SET UP AND REGULATE ISOLETTE OR INCUBATOR (320)	C 15 MONITOR FETAL HEART TONES (356)
B172	SET UP BALKIN FRAME FOR SKELETAL TRACTION (321)	C 16 MONITOR PATIENT BLOOD LOSS (357)
B173	SET UP INSTRUMENTS FOR MINOR SURGERY (322)	C 17 ORGANIZE PERSONNEL ASSISTING WITH DELIVERY ROOM PROCEDURES (358)
B174	SET UP INTRAVENOUS INFUSION FOR ADMINISTRATION (323)	C 18 ORGANIZE PERSONNEL ASSISTING WITH SURGICAL PROCEDURES (359)
B175	SET UP ISOLATION UNITS (324)	C 19 ORGANIZE SUPPLIES OR EQUIPMENT FOR DELIVERY ROOM PROCEDURES (360)
B176	SET UP OR USE OXYGEN EQUIPMENT (325)	C 20 ORGANIZE SUPPLIES OR EQUIPMENT FOR SURGICAL PROCEDURES (361)
B177	SET UP OR USE SUCTION EQUIPMENT (326)	C 21 PASS STERILE INSTRUMENTS AND SUPPLIES TO PHYSICIAN DURING SURGICAL PROCEDURES (362)
B178	SET UP UNDER-TEN SEALED DRAILAGE (327)	C 22 PERFORM CIRCUMCISION OF NEWBORN INFANTS (363)
B179	START BLOOD TRANSFUSIONS (328)	C 23 PERFORM PERINEAL CARE (364)
B180	SUPERVISE DUTIES OF CONVALESCING PATIENTS (329)	C 24 PERFORM SPONGE AND NEEDLE COUNTS (365)
B181	TAKE AND RECORD BLOOD PRESSURES (330)	C 25 POSITION PATIENT FOR OR DURING DELIVERY ROOM PROCEDURES (366)
B182	TAKE AND RECORD PULSES, TEMPERATURES AND RESPIRATIONS (331)	C 26 POSITION PATIENT FOR OR DURING SURGICAL PROCEDURES (367)
B183	TEACH CARDIAC CARE TO PATIENTS (332)	C 27 PREPARE OPERATIVE AREA OF PATIENT FOR SURGERY (368)
B184	TEACH DIABETIC CARE TO PATIENTS (333)	C 28 PREPARE OR SCHEDULES (369)
B185	TEACH PATIENT ABOUT POSTURAL DRALINGE (334)	C 29 PREPARE PERINATAL AREA OF PATIENT FOR INFANT DELIVERY (370)
B186	TEACH PATIENT TO AUMILIATE HIS OWN TREATMENT (335)	C 30 PREPARE THE DELIVERY ROOM FOR INFANT DELIVERY (371)
B187	TEACH PATIENT TO USE VARIOUS TYPES OF EQUIPMENT (336)	C 31 PREPARE THE SURGICAL SUITE FOR SURGICAL PROCEDURES (372)
B188	TEACH PATIENTS ABOUT POSTOPERATIVE RECOVERY PROCEDURES SUCH AS EXTREMITY MOVEMENTS, DEEP BREATHING OR COUGHING (337)	C 32 SCRUB, GOWN AND GLOVE IN PREPARATION FOR STERILE PROCEDURES (373)
B189	TRANSPORT OR ACCOMPANY PATIENTS WITHIN HOSPITAL, DISPENSARY OR CSE/ASP (CASUALTY STAGING FACILITY/AEROMEDICAL STAGING FACILITY) (338)	C 33 SUPERVISE PERFORMANCE OF PERSONNEL DURING DELIVERY ROOM PROCEDURES (374)
B190	TRANSPORT PATIENTS ON LITTERS (339)	C 34 SUPERVISE PERFORMANCE OF PERSONNEL DURING OR SURGICAL PROCEDURES (375)
B191	USE MECHANICAL DEVICES, SUCH AS MOYER LIFT, TO LIFT AND MOVE PATIENTS (340)	C 35 SUPERVISE THE PREPARATION OF PATIENTS FOR DELIVERY ROOM PROCEDURES (376)
B192	WASH ARTICLES OF PATIENT'S CLOTHING (341)	C 36 SUPERVISE THE PREPARATION OF PATIENT FOR OR SURGICAL PROCEDURES (377)
C	OPERATING DELIVERY ROOM	D ANESTHESIA
C 1	ASSIST ANESTHETIST DURING OPERATING ROOM OR SURGICAL PROCEDURES (342)	D 1 ADMINISTER ANESTHESIA BLOCKS SUCH AS BRACHIAL, FIELD, REGIONAL OR AUXILIARY (378)
C 2	ASSIST SURGEON DURING OPERATION BY RETRACTING OR SPONGING (343)	D 2 ADMINISTER INHALATION ANESTHESIA (379)
C 3	CIRCULATE DURING OPERATIONS AND ANTICIPATE THE NEEDS OF SCRUBBED MEMBERS OF SURGICAL TEAMS OR ANESTHETISTS (344)	D 3 ADMINISTER INTRAVENOUS ANESTHESIA OR OTHER DRUGS ACCESSORY TO ANESTHESIA (380)
C 4	COORDINATE OR SCHEDULES WITH OR TEAMS OR PATIENT'S NURSING UNIT (345)	D 4 ADMINISTER LOCAL ANESTHESIA (381)
C 5	DIRECT OR INSTRUCT PERSONNEL IN PREPARATION, DISINFECTION AND CARE OF OR DELIVERY ROOM (346)	D 5 DETERMINE TYPE OF ANESTHETIC AGENT TO BE USED (382)
C 6	DIRECT OR SUPERVISE THE PREPARATION OF OPERATIVE SITES FOR SURGICAL PROCEDURES (347)	D 6 EXPLAIN ANESTHETIC PROCEDURE TO PATIENT (383)
C 7	DIRECT OR SUPERVISE THE PREPARATION OF SUPPLIES OR EQUIPMENT FOR DELIVERY ROOM PROCEDURES (348)	
C 8	EQUIPMENT FOR SURGICAL PROCEDURES (349)	
C 9	FUNCTION IN ON-CALL STATUS (350)	

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- E 7 MAINTAIN ANESTHESIA DURING OPERATIVE, DELIVERY AND JR  
DINGJUDICATIVE PROCEDURES (384)
- E 8 MAINTAIN EQUIPMENT AND SUPPLIES USED FOR ADMINISTRATION OF  
ANESTHETIC AGENTS (385)
- E 9 MAINTAIN SUPPLY OF ANESTHETIC AGENTS FOR DO ACROSS-JR  
DAYS (386)
- D 10 MONITOR PATIENT'S LEVEL OF PAIN ON CO-SECUITS (345)
- D 11 MONITOR POSTANESTHETIC STATE OF PATIENTS (383)
- D 12 MONITOR SPINAL ANESTHESIA (384)
- D 13 OBSERVE PATIENT'S CONDITION DURING SURGICAL PROCEDURE AND  
ADVISE SURGEON (390)
- D 14 PERFORM ENDOTRACHEAL intubation (391)
- D 15 PERFORM SUPERVISE CONDUCTIVITY TESTING (392)
- D 16 PERFORM REENTHAL MEDICATIONS IN COURTERACI URGENT CARE  
SYMPTOMS DURING ANESTHESIA (393)
- D 17 PERFORM SPINAL PROJECTION AND ASPIRATE SPINAL  
ANESTHESIA (394)
- D 18 RECORD ANESTHESIA DATA DURING SURGICAL PROCEDURES (395)
- D 19 SUPERVISE OR INSTRUCT PERSONNEL IN USE OR MAINTENANCE OF  
RESCUSITATIVE APPARATUS (396)
- D 20 WRITE JRUG ORDERS AS INSTRUCTED BY PHYSICIAN AND OBTAIN  
HIS SIGNATURE (397)
- E SPECIALTY NURSING**
- E 1 ADD MEDICATIONS TO INTRAVENOUS INFUSIONS (398)
- E 2 ADMINISTER PSYCHIATRICAL TESTS (399)
- E 3 ADMINISTER SKIN TESTS (400)
- E 4 APPLY PACEMAKERS TO PATIENTS (401)
- E 5 ASSIST WITH GROUP PSYCHOTHERAPY (402)
- E 6 ASSIST WITH INSERTION OF CHEST TUBES (403)
- E 7 ASSIST WITH PSYCHOSURGERY (404)
- E 8 ASSIST WITH SHOCK THERAPY SUCH AS ELECTRO-COULLUSIVE,  
INSULIN OR IODINE (405)
- E 9 CHECK READINESS OF OR ASTUCK CARDIOPULMONARY EMERGENCY  
SETS (406)
- E 10 CONDUCT GROUP PSYCHOTHERAPY (407)
- E 11 CONDUCT SICK CALL IN ABSENCE OF PHYSICIAN (408)
- E 12 CONDUCT STAFF DISCUSSIONS ON CONFLICTS BETWEEN PATIENTS  
AND STAFF (409)
- E 13 DEBRIDE WOUNDS (410)
- E 14 DEBRILLATE PATIENTS (411)
- E 15 DESIGN, MODIFY OR BUILD THERAPY-RELATED EQUIPMENT (412)
- E 16 DIAGNOSE PATIENT ILLNESSES (413)
- E 17 DRIVE MILITARY VEHICLES IN PERFORMING (NURSING) (MEDICAL)  
DUTIES (414)
- E 18 IDENTIFY AND MANAGE BURNS (415)
- E 19 IDENTIFY AND MANAGE COLD INJURIES (416)
- E 20 IDENTIFY AND MANAGE FRACTURES OR DISLOCATIONS (417)
- E 21 IDENTIFY AND MANAGE STROKE OR HEAT EXHAUSTION (418)
- E 22 INITIATE TREATMENT AS A RESULT OF INTERPRETING MUNITION  
DEVICES (419)
- E 23 INSERT ARTERIAL CATHETERS (420)
- E 24 INSERT INTRAVENOUS PLACEMENT UNITS, SUCH AS INTERCATHS  
OR JELCO NEEDLES (421)
- E 25 INTERPRET ELECTROCARDIOGRAPHIC TRACINGS (422)
- E 26 INTERPRET PSYCHOLOGICAL TESTS (423)
- E 27 MAINTAIN PROFESSIONAL ACTIVITY REPORTS (424)
- E 28 MAINTAIN UNIT ALCOHOL AND NARCOTIC RECORD  
(AF FORM 279) (425)
- E 29 MAKE UP DISASTER CASUALTY CONTROL KITS. (426)
- E 30 MANAGE EMERGENCY DENTAL PROBLEMS (427)
- E 31 MONITOR HEART TONES OTHER THAN FETAL (428)
- E 32 OBSERVE AND RECORD BEHAVIORAL REACTIONS OF PSYCHIATRIC  
PATIENTS (429)
- E 33 OBTAIN MEDICAL HISTORY FROM PATIENT OR OTHER  
INFORMANT (430)
- E 34 UPDATE NURSING HISTORIES (431)
- E 35 ORGANIZE OR MONITOR RABIES CONTROL PROGRAM (432)
- E 36 PARTICIPATE IN CRITIQUES OF PATIENT THERAPY GROUPS (433)
- E 37 PARTICIPATE IN STAFF MEETINGS ON PSYCHODYNAMICS OF  
PATIENT BEHAVIOR (434)
- E 38 PERFORM ALLERGY TESTING (435)
- E 39 PERFORM BESIDE NURSING AUDIT (436)
- E 40 PERFORM CRICOHYOIDOTOMY (437)
- E 41 PERFORM CUTDOWN (438)
- E 42 PERFORM INDIVIDUAL PSYCHOTHERAPY (439)
- E 43 PERFORM OCCUPATIONAL THERAPY PROCEDURES (440)
- E 44 PERFORM PAP SMEARS (441)
- E 45 PERFORM PERitoneal DIALYSIS (442)
- E 46 PERFORM PHYSICAL THERAPY PROCEDURES (443)
- E 47 PERFORM PHYSICAL EXAMINATIONS (444)
- E 48 PERFORM ROUTINE HEMATOLOGY (445)
- E 49 PERFORM ROUTINE URINALYSIS (446)
- E 50 PERFORM TRACHEOTOMY (447)
- E 51 PLAN ACTIVITIES FOR PSYCHIATRIC PATIENTS (448)
- E 52 PREPARE AND PRESENT SPEECHES OR ADDRESSES (449)
- E 53 PRESCRIBE MEDICATIONS (450)
- E 54 PRESCRIBE TREATMENTS (451)
- E 55 HEAD AND RECORD CENTRAL VENOUS PRESSURE (452)
- E 56 KROLL SKIN GRAFTS (453)
- E 57 SCREEN BLOOD DONORS AND DRAW BLOOD FOR BLOOD BANK (454)
- E 58 SERVE AS A MEMBER OF CARDIOPULMONARY RESUSCITATION  
TEAM (455)
- E 59 SET UP EQUIPMENT FOR USE IN CARDIAC EMERGENCIES (456)
- E 60 SET UP OR APPLY ELECTRONIC MONITORING DEVICES TO  
PATIENTS (457)
- E 61 SUGGEST OR ORDER LABORATORY OR X-RAY PROCEDURES FOR  
PATIENTS (458)
- E 62 TAKE CULTURES TO DETERMINE THE EXISTENCE OF  
DISEASE-PRODUCING ORGANISMS (459)
- E 63 TAKE ELECTROCARDIOGRAPH (EKG) TRACINGS (460)
- E 64 TAKE X-RAYS (461)
- E 65 TIE OFF OR CLAMP BLEEDERS (462)

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JOH INVENTORY/TITLE/TASK TITLES)

JOHIN PAGE 7

- E 65 TRAIN NON-MEDICAL PHYSICIAN IN EMERGENCY FIRST AID PROCEDURES (463)
  - E 67 TREAT SNAKE BITE (464)
  - E 68 WRITE PRESCRIPTIONS FOR PHYSICIAN SIGNATURE (465)
- F CENTRAL STERILE SUPPLY
  - F 1 COORDINATE CENTRAL STERILE SUPPLY ACTIVITIES WITH PROFESSIONAL AND ADMINISTRATIVE SERVICES (466)
  - F 2 DETERMINE METHOD FOR HULK STORAGE OF CENTRAL STERILE SUPPLIES OR EQUIPMENT (467)
  - F 3 DETERMINE SUPPLY OF EQUIPMENT LEVELS FOR CENTRAL STERILE SUPPLY (468)
  - F 4 DEVELOP A DISPENSING AND COLLECTING SYSTEM FOR CENTRAL STERILE SUPPLIES OR EQUIPMENT (469)
  - F 5 DEVELOP PICTORIAL CONTENT INDEX FOR BASIC CENTRAL STERILE SUPPLIES OR EQUIPMENT (470)
  - F 6 MAINTAIN RECORDS ON VOLUME OF CENTRAL STERILE SUPPLIES USED (471)
  - F 7 OPERATE DISTILLATION EQUIPMENT (472)
  - F 8 PREPARE ITEMS FOR STERILIZATION (473)
  - F 9 STERILIZE INSTRUMENTS (474)
  - F 10 STERILIZE SUPPLIES (475)
- G COMMUNITY HEALTH
  - G 1 ADMINISTER HEARING TESTS (476)
  - G 2 ADMINISTER IMUNIZATIONS (477)
  - G 3 ADMINISTER VISION TESTS (478)
  - G 4 ASSIST FAMILIES TO PLAN HEALTH CARE WITHIN THEIR FINANCIAL, EMOTIONAL AND PHYSICAL RESOURCES (479)
  - G 5 ASSIST IN AIR FORCE COMMUNITY COMMUNICABLE DISEASE TESTING PROGRAMS (480)
  - G 6 ASSIST IN CONTACT FOLLOW-UP OF COMMUNICABLE DISEASE PATIENTS (481)
  - G 7 ASSIST IN EPIDEMIOLOGICAL STUDIES OF COMMUNICABLE DISEASES (482)
  - G 8 ASSIST IN MEDICAL OR DENTAL EXAMINATION OF SCHOOL CHILDREN (483)
  - G 9 CONDUCT PEDIATRIC OUTPATIENT CLINIC (484)
  - G 10 CONDUCT PRE-AND-POSTNATAL CLINICS (485)
  - G 11 COUNSEL PATIENTS REGARDING DRUG USE AND ABUSE (486)
  - G 12 COUNSEL UNHELD MOTHERS (487)
  - G 13 DETERMINE IMMUNIZATION REQUIREMENTS (488)
  - G 14 MAKE REFERRALS TO LOCAL PUBLIC HEALTH AGENCIES FOR PATIENT FOLLOW-UP AND CARE (489)
  - G 15 MANAGE AN ADULT OUTPATIENT CLINIC SUCH AS OB-GYN, CANCER DETECTION, FAMILY PLANNING, NUTRITION, OR DIABETES (490)
  - G 16 PERFORM ANTENATAL TEACHINGS (491)
  - G 17 PERFORM DIAGNOSTIC TESTS SUCH AS PKU OR PATCH TESTS (IN A COMMUNITY HEALTH SETTING) (492)
  - G 18 PERFORM MINOR SURGERY (493)
- H RESEARCH AND DEVELOPMENT
  - H 1 ANALYZE RESEARCH DATA (508)
  - H 2 ASSIST IN DEFINING RESEARCH PROBLEMS (509)
  - H 3 COLLECT RESEARCH DATA (510)
  - H 4 DEVELOP RESEARCH DESIGNS (511)
  - H 5 INTERPRET RESEARCH DATA AND FINDINGS (512)
  - H 6 SERVE AS RESEARCH ASSISTANT (513)
  - H 7 TEST CONCLUSIONS DERIVED FROM RESEARCH (514)
  - H 8 TEST NEW EQUIPMENT, SUPPLY ITEMS OR UNIFORMS (515)
  - H 9 WRITE RESEARCH REPORTS (516)
- I EDUCATION
  - I 1 ADMINISTER WRITTEN, ORAL OR PERFORMANCE EXAMINATIONS (517)
  - I 2 CONDUCT CONTINUOUS IN-SERVICE EDUCATION PROGRAMS (518)
  - I 3 CONDUCT EDUCATIONAL WORKSHOPS, CONFERENCES OR SYMPOSIA (519)
  - I 4 CONDUCT FORMAL CLASSROOM TRAINING (520)
  - I 5 CONDUCT OUT-ON-THE-JOB-TRAINING (521)
  - I 6 CONDUCT ORIENTATION SESSIONS FOR NURSING (MEDICAL) SERVICE PERSONNEL (522)
  - I 7 CONSTRUCT TRAINING AIDS (523)
  - I 8 DEMONSTRATE HOW TO LOCATE TECHNICAL INFORMATION (524)
  - I 9 DEMONSTRATE NURSING PROCEDURES (525)
  - I 10 DEVELOP CURRICULA (526)
  - I 11 EVALUATE CURRICULA (527)
  - I 12 EVALUATE EDUCATIONAL TEST ITEMS (528)
  - I 13 EVALUATE FORMAL CLASSROOM TRAINING (529)
  - I 14 EVALUATE OUT (530)
  - I 15 MAINTAIN TRAINING RECORDS (531)
  - I 16 MONITOR OUT RECORDS (532)
  - I 17 OBTAIN TRAINING AIDS, SPACE OR EQUIPMENT (533)
  - I 18 OPERATE AUDIO-VISUAL EQUIPMENT (534)

- J 19 PARTICIPATE IN COORDINATION OF MEDICAL EQUIPMENT PREPARATIONS  
J 20 PERFORM MEDICAL EQUIPMENT CHECKLISTS (532)
- J 21 PLACEMENT OF MEDICAL EQUIPMENT ON PLANE FOR PATIENTS (535)
- J 22 PLACEMENT OF MEDICAL EQUIPMENT ON PLANE FOR PATIENTS (536)
- J 23 PREPARE THERAPEUTIC EQUIPMENT (537)
- J 24 SECURE EQUIPMENT IN PLANE (538)
- J 25 SELECT THE APPROPRIATE EQUIPMENT (539)
- J 26 SUPERVISE PATIENTS AS THEY SIT IN PLANE (540)
- J 27 SUPERVISE USE OF MEDICAL EQUIPMENT IN PLANE (541)
- J 28 TREAT PATIENTS (542)
- J 29 WRITE PLANS OF EVACUATION (543), CIVILIAN TRANSPORT DOCUMENTS (544)
- J 30 WRITE PLANS OF OTHER SUPPORT DOCUMENTS (545)
- J 31 WRITE STUDY GUIDES (546)

## J AEROMEDICAL ASSISTANT

- J 1 ACT AS LEADERSHIP FOR MEDICAL AND FLIGHT CREWS (548)
- J 2 ARRANGE MEDICAL EQUIPMENT TO SUIT NEEDS OF CASES GIVING AND COORDINATION OF PATIENT EQUIPMENT (549)
- J 3 COORDINATE RECEIPT OF PREPARATION OF MEDICAL EQUIPMENT FOR PATIENTS (550)
- J 4 COORDINATE WITH AIR MEDICAL OFFICER OR MEDICAL OFFICER ON INCARCERATION OR OUTSOURCING PATIENT TO OTHER UNITS (551)
- J 5 COORDINATE WITH FLIGHT CREW CONCERNING SUCH ITEMS AS FLIGHT PLANS OR MEDICAL EQUIPMENT (552)
- J 6 COORDINATE WITH MAC REGARDING PATIENT TRANSPORTATION REQUIREMENTS OR LIMITATIONS (553)
- J 7 EMPLOY OR DELAY PATIENTS DURING AEROMEDICAL EVACUATION (554)
- J 8 GIVE MEDICAL CARE TO PATIENTS ENROUTE BETWEEN AIRCRAFT AND RECEIVING UNIT (555)
- J 9 OFFLOAD OR UNLOAD PASSENGER AIRCRAFT AND MEDICAL EQUIPMENT (556)
- J 10 OPERATE INFLIGHT MEDICAL SYSTEMS (557)
- J 11 PERFORM PREFLIGHT CHECK OF PATIENT CARE AREA ON AEROMEDICAL AIRCRAFT (558)
- J 12 PLAN OF PREFLIGHT CONSULTING CARE IN FLIGHT (559)
- J 13 PREPARE AIRCRAFT TO RECEIVE PATIENTS (560)
- J 14 PREPARE TO GIVE PREFLIGHT BRIEFINGS TO MEDICAL CREW (561)
- J 15 PREPARE MEDICAL SUPPLIES OR EQUIPMENT FOR AEROMEDICAL EVACUATION (562)
- J 16 PREPARE OR GIVE PREFLIGHT AND INFLIGHT BRIEFINGS TO PATIENTS (563)
- J 17 PREPARE PATIENT AIRLIFT RECORDS (564)
- J 18 PREPARE PATIENT INFLIGHT PLANS (565)
- J 19 PREPARE PATIENT POSITIONING PLANS (566)
- J 20 PREPARE PLANS FOR PATIENT EVACUATION FROM AIRCRAFT IN EMERGENCIES (567)
- J 21 REQUEST AEROMEDICAL EVACUATION OF PATIENTS (568)

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**APPENDIX B: DIFFERENCE BETWEEN NURSE AND MEDICAL  
SERVICE CORPSMAN IN TASKS PERFORMED**

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DIFERENCE BETWEEN SPC001 AND SPC002

OVERALL DIFFERENCE BETWEEN TOTAL NURSES AND TOTAL MEDICAL SERVICES  
 SPC001 MEMBERS = 1593 NURSE TOTAL SAMPLE  
 SPC002 MEMBERS = 1522 MEDICAL SERVICES TOTAL SAMPLE

AVERAGE PERCENT TIME BY ALL GROUP MEMBERS---DIFFERENCE, SPC001 MINUS SPC002  
 SPC002 AVERAGE PERCENT TIME BY ALL GROUP MEMBERS.....  
 SPC001 AVERAGE PERCENT TIME BY ALL GROUP MEMBERS.....  
 PERCENT MEMBERS PERFORMING---DIFFERENCE, SPC001 MINUS SPC002  
 SPC002 PERCENT MEMBERS PERFORMING.....  
 SPC001 PERCENT MEMBERS PERFORMING.....

TASK	TASK TITLE	SPC002	SPC001	DIFFERENCE, SPC001 MINUS SPC002
C 30	PREPARE THE DELIVERY ROOM FOR INFANT DELIVERY (371)	86.57	12.68	.73-.89
C 11	MAINTAIN RECORD OF SURGICAL PROCEDURES (352)	81.92	9.46	.72-.46
C 31	PREPARE THE SURGICAL SUITE FOR SURGICAL PROCEDURES (372)	79.79	7.95	.71-.84
C 23	PERFORM PERINEAL CARE (349)	76.08	7.75	.68-.33
A 118	RECYCLED PHYSICIAN'S ORDERS (118)	79.85	12.61	.67-.23
E 28	MAINTAIN UNIT ALCOHOL AND NARCOTIC RECORD (AF FORM 579) (425)	78.15	12.16	.66-.00
B 2	ACCOUNT FOR NARCOTICS OR CONTROLLED DRUGS (151)	85.62	22.27	.63-.35
A 77	NOTIFY PHYSICIANS OF OUTDATED ORDERS (171)	77.53	15.31	.62-.22
B 96	INITIATE REQUESTS FOR DRUGS FROM PHARMACY (245)	91.65	32.06	.59-.59
E 1	ADD MEDICATIONS TO INTRAVENOUS INFUSIONS (398)	89.14	29.76	.59-.38
B 167	SERVE AS CHAPERONE FOR MEDICAL EXAMINATION OR TREATMENT (316)	80.54	21.22	.59-.32
D 20	WRITE DRUG ORDERS AS PRESCRIBED BY PHYSICIAN AND OBTAIN HIS SIGNATURE (397)	80.73	22.08	.58-.65
A 12	CHECK OFF COMPLETED PATIENT CARE IN CARDDEX TO INSURE COMPLIANCE WITH PHYSICIANS' ORDERS (12)	80.98	23.32	.57-.65
C 13	MAKE UP INSTRUMENT SETS OR SURGICAL PACKS FOR DELIVERY ROOM PROCEDURES (354)	68.99	12.94	.56-.05
B 17	ADMINISTER INTRAVENOUS INFUSIONS (166)	87.19	31.27	.55-.92
B 65	ASSIST WITH VAGINAL EXAMINATIONS (214)	70.31	14.52	.55-.79
D 10	MONITOR PATIENT'S LEVEL OF PAIN OR CONSCIOUSNESS (387)	73.70	19.05	.54-.64
B 111	MAKE WARD ROUNDS WITH PHYSICIANS (260)	78.66	24.31	.54-.35
B 109	MAKE WARD ROUNDS ALONE (258)	81.17	27.07	.54-.10
B 105	MAKE ENTRIES IN WARD CARDDEXES (154)	81.98	27.92	.54-.06
B 22	ADMINISTER NARCOTICS (171)	89.14	36.27	.52-.87
C 14	MAKE UP INSTRUMENT SETS OR SURGICAL PACKS FOR OPERATIVE PROCEDURES (355)	66.42	13.67	.52-.75
B 18	ADMINISTER INTRAVENOUS MEDICATIONS (167)	80.85	28.58	.52-.27
C 8	DIRECT OR SUPERVISE THE PREPARATION OF SUPPLIES OR EQUIPMENT FOR SURGICAL PROCEDURES (349)	62.40	12.35	.50-.05
B 158	PREPARE PRESCRIBED MEDICATIONS (307)	82.23	32.19	.50-.04
I 9	DEMONSTRATE NURSING PROCEDURES (152)	78.15	28.71	.49-.44
B 165	REVIEWS OR INTERPRET LAB REPORTS AND REPORT FINDINGS TO PHYSICIAN (314)	78.84	29.96	.48-.88
B 102	MAINTAIN OR DISCONTINUE BLOOD TRANSFUSIONS (251)	72.94	24.70	.48-.24
A 106	PREPARE OR MAINTAIN INPATIENT RECORDS (106)	76.65	48.58	.48-.07
B 161	PROVIDE EMOTIONAL SUPPORT TO PATIENT FAMILIES (310)	77.46	29.50	.47-.96
C 25	POSITION PATIENT FOR OR DURING DELIVERY ROOM PROCEDURES (366)	59.82	12.02	.47-.80
B 118	OBSERVE AND RECORD CONDITION OF PATIENTS (267)	90.71	43.17	.47-.54

## DIFFERENCE BETWEEN SPC001 AND SPC002

GPD01-PAGE 2

B 21	ADMINISTER MEDICATIONS VAGINALLY (170)	56.37	9.26	47.11	*21	*03	*16
B 121	OBTAIN PATIENT OR FAMILY CONSENT FOR TREATMENT (270)	84.93	38.30	46.63	*51	*26	*25
I 19	PARTICIPATE IN CONTINUOUS INSERVICE EDUCATION PROGRAMS AS A LEARNER (135)	69.68	23.46	46.22	*42	*23	*19
C 10	GOWN AND GLOVE PHYSICIAN OR OTHER SURGICAL TEAM MEMBERS (135)	60.89	15.37	45.52	*26	*11	*15
A 11	CONDUCT INSPECTIONS OF WARDS OR OTHER AREAS WHERE NURSING (MEDICAL) SERVICE PERSONNEL ARE EMPLOYED (111)	75.08	30.35	44.72	*44	*22	*23
A 146	NUTRITION PATIENT, PARENT OR GUARDIAN SIGNATURES ON LEGAL DOCUMENTS SUCH AS OPERATIVE PERMITS (146)	84.75	41.00	43.75	*51	*27	*24
A 116	HEAD PROFESSIONAL NURSING JOURNALS AND PUBLICATIONS (116)	85.88	42.25	43.63	*64	*35	*30
A 79	ORDER OR COORDINATE PATIENT DIETS WITH FOOD SERVICE (79)	73.95	30.75	43.20	*42	*21	*20
A 33	DIRECT OR SUPERVISE THE ADMINISTRATION OF DRUGS (33)	73.76	30.68	43.08	*42	*24	*19
B 156	PREPARE PATIENTS FOR SPECIAL DIAGNOSTIC OR TREATMENT PROCEDURES (305)	79.79	36.73	43.06	*49	*25	*23
A 144	SUPERVISE THE SERVING OF FOOD TO PATIENTS (144)	66.29	23.26	43.03	*36	*17	*19
A 7	BRIEF FAMILY ON CONDITION OF PATIENTS (7)	79.91	37.58	42.33	*49	*24	*25
B 169	SERVE PRESCRIBED DIETS TO PATIENTS (318)	77.46	35.55	41.92	*43	*30	*13
B 60	ASSIST WITH BLOOD TRANSFUSIONS (1209)	69.99	28.19	41.81	*33	*12	*21
B 112	MEASURE AND RECORD INTAKE AND OUTPUT (261)	83.55	42.18	41.18	*49	*34	*16
B 66	ATTACH OR ANCHOR DRAINAGE OR ADMINISTRATION TUBING (215)	64.85	23.72	41.13	*33	*11	*22
C 9	FUNCTION IN ON-CALL STATUS (1350)	65.91	24.90	41.01	*30	*22	*08
B 174	SET UP INTRAVENOUS INFUSION FOR ADMINISTRATION (323)	88.20	47.31	40.89	*56	*32	*27
E 68	WRITE PRESCRIPTIONS FOR PHYSICIAN SIGNATURE (465)	76.59	35.94	40.65	*50	*35	*15
D 11	MONITOR POSTANESTHETIC RECOVERY OF PATIENTS (388)	51.91	11.43	40.48	*28	*06	*23
A 102	PREPARE FORMS FOR PATIENT LEAVES, PASSES OR INTERWARD TRANSFERS (102)	64.85	24.51	40.34	*33	*14	*19
A 129	SCHEDULE DIAGNOSTIC TESTS, CONSULTATIONS OR SPECIAL PROCEDURES WITH APPROPRIATE DEPARTMENTS (129)	69.62	29.50	40.12	*41	*30	*11
A 78	NOTIFY PHYSICIANS OF PATIENT ARRIVALS AND STATUS (78)	85.12	45.47	39.66	*54	*44	*10
B 117	MONITOR THE QUALITY OF PATIENTS' DIETS (266)	56.50	17.28	39.22	*28	*08	*20
B 136	PERFORM PATIENT ADMISSION, TRANSFER OR DISPOSITION PROCEDURES (1285)	81.92	42.71	39.21	*59	*33	*26
B 79	COUNSEL PATIENTS ON MATTERS SUCH AS TREATMENTS, HOSPITAL DISCHARGE OR PERSONAL PROBLEMS (228)	80.85	41.79	39.07	*56	*30	*26
B 150	PREPARE AND MAINTAIN NURSING CARE PLANS (199)	59.82	20.96	38.86	*28	*11	*17
B 157	PREPARE PATIENTS PSYCHOLOGICALLY TO COPE WITH THEIR ILLNESSES (306)	62.65	24.38	38.27	*35	*13	*21
B 56	ASSIST PATIENTS TO TURN, COUGH AND DEEP BREATHE (205)	78.53	40.54	37.99	*47	*31	*17
G 11	COUNSEL PATIENTS REGARDING DRUG USE AND ABUSE (486)	48.78	11.37	37.41	*24	*06	*18
B 78	COLLECT FOOD TRAYS OR SERVING UNITS (227)	78.59	41.20	37.40	*44	*41	*03
B 110	MAKE WARD ROUNDS WITH (OTHER) WARD NURSES, SUPERVISORS OR CHIEF NURSE (129)	69.99	32.72	37.27	*38	*23	*15
B 119	OBSERVE AND REPORT CHANGES IN CONDITION OF PATIENTS (268)	87.70	50.53	37.17	*70	*42	*28
B 114	MONITOR INTRAVENOUS ADMINISTRATION (263)	82.05	45.14	36.91	*58	*31	*27
B 168	SERVE BETWEEN-MEAL NOURISHMENT TO PATIENTS (317)	70.43	33.77	36.66	*31	*24	*08
B 26	ADMINISTER PARTIAL BED BATHS (175)	75.33	38.76	36.56	*36	*31	*05
A 117	RECEIVE AND DELIVER MAIL, MESSAGES OR PERSONAL ITEMS FOR PATIENTS (117)	68.36	32.13	36.23	*30	*21	*09
B 188	TEACH PATIENTS ABOUT POSTOPERATIVE RECOVERY PROCEDURES SUCH AS EXTREMITY MOVEMENTS, DEEP BREATHING OR COUGHING (337)	64.85	29.11	35.74	*37	*19	*19
B 3	ADMINISTER BED PANS OR URINALS (152)	83.80	48.23	35.58	*46	*42	*04
E 9	CHECK ADEQUACY OF OR RESTOCK CARDIOPULMONARY EMERGENCY SETS (406)	58.57	23.13	35.44	*27	*12	*15

## DIFFERENCE BETWEEN SP6001 AND SPEC001

		GP6001	PAGE	3		
B	86	EXPLAIN GENERAL SURGICAL PROCEDURES AND PROBABLE POSTOPERATIVE CONDITIONS TO PATIENTS (1235)	64.78	29.57	35.22	*.37 *.17 *.19
B	33	AMBULATE PATIENTS (182)	80.98	45.86	35.12	*.50 *.37 *.13
B	179	START BLOOD TRANSFUSIONS (328)	46.70	11.76	31.94	*.19 *.04 *.15
B	52	ASSIST IN OBTAINING PAP (PAPANICOLAOU) SMEAR (1201)	46.58	11.70	34.88	*.28 *.12 *.16
B	93	IDENTIFY PERSONAL OR EMOTIONAL PROBLEMS OR NEEDS OF PATIENTS (2422)	77.34	42.64	34.70	*.50 *.29 *.21
E	34	OBTAIN NURSING HISTORIES (431)	46.45	12.09	34.36	*.25 *.06 *.16
A	72	IMMEDIATE INTERPERSONAL RELATIONSHIPS BETWEEN PATIENTS AND PHYSICIANS (172)	63.90	29.57	34.34	*.36 *.22 *.15
B	6	ADMINISTER COMPLETE BED BATHS (155)	70.37	36.27	34.10	*.31 *.27 *.04
E	24	INSERT INTRAVENOUS PLACEMENT UNITS, SUCH AS INTERCATHS OR JELCO NEEDLES (421)	51.48	17.61	33.87	*.27 *.07 *.20
B	129	PERFORM DRUG INVENTORY (1278)	54.24	20.89	33.34	*.27 *.13 *.14
B	138	PERFORM POSTOPERATIVE CARE (287)	68.99	36.20	32.79	*.43 *.28 *.15
B	100	INSTRUCT PATIENTS ON LIMITATIONS FOLLOWING SURGERY (249)	64.16	31.47	32.68	*.34 *.18 *.16
B	90	GIVE BACK RUBS (1239)	67.36	34.82	32.53	*.30 *.24 *.06
E	31	MONITOR HEART TONES OTHER THAN FETAL (428)	45.32	12.94	32.38	*.22 *.06 *.16
A	82	ORIENT VISITORS TO WARD (82)	71.68	39.62	32.26	*.35 *.30 *.05
C	29	PREPARE PERINEAL AREA OF PATIENT FOR INFANT DELIVERY (370)	39.36	7.42	31.94	*.16 *.03 *.13
B	55	ARRANGE FURNITURE IN PATIENT'S ROOM (199)	67.92	36.01	31.92	*.31 *.27 *.04
B	155	PREPARE PATIENTS FOR PHYSICIAN EXAMINATION OR TREATMENT (304)	86.57	55.12	31.44	*.58 *.53 *.05
E	62	TAKE CULTURES TO DETERMINE THE EXISTENCE OF DISEASE-PRODUCING ORGANISMS (459)	82.49	51.05	31.43	*.47 *.48 *.01
C	7	DIRECT OR SUPERVISE THE PREPARATION OF SUPPLIES OR EQUIPMENT FOR DELIVERY ROOM PROCEDURES (346)	41.43	10.05	31.38	*.15 *.06 *.09
B	115	MONITOR MAINTENANCE OF ASEPTIC TECHNIQUE (1264)	70.37	39.16	31.21	*.42 *.26 *.16
B	139	PERFORM PREOPERATIVE CARE (1288)	66.42	35.28	31.13	*.37 *.24 *.13
B	25	ADMINISTER ORAL MEDICATIONS (1174)	91.40	60.32	31.08	*.66 *.48 *.17
B	106	MAKE POSTOPERATIVE OR RECOVERY BEDS (255)	67.29	36.50	30.70	*.29 *.30 *.01
I	5	CONDUCT OUT (ON-THE-JOB)-TRAINING (521)	66.42	35.74	30.67	*.41 *.33 *.08
A	81	ORIENT NEW PATIENTS TO HOSPITAL RULES AND FACILITIES (81)	78.66	48.03	30.63	*.44 *.44 *.00
B	104	MAKE BEDS OTHER THAN POSTOPERATIVE OR RECOVERY (253)	77.53	46.98	30.55	*.40 *.45 *.05
A	61	INTERPRET ADMINISTRATIVE POLICIES OR PROCEDURES TO PATIENTS, VISITORS OR PERSONNEL (61)	80.85	50.33	30.53	*.51 *.46 *.06
B	30	ADMINISTER TOPICAL MEDICATIONS (1179)	78.28	47.83	30.45	*.34 *.34 *.01
B	77	COLLECT AND LABEL SPECIMENS SUCH AS URINE, FECES OR SPUTUM FROM PATIENTS (1226)	89.89	59.46	30.43	*.56 *.56 *-.00
D	6	EXPLAIN ANESTHETIC PROCEDURE TO PATIENT (383)	53.67	23.46	30.22	*.27 *.16 *.11
B	69	CATHETERIZE PATIENTS (1218)	76.21	46.45	29.76	*.38 *.26 *.12
C	6	DIRECT OR SUPERVISE THE PREPARATION OF OPERATIVE SITES FOR SURGICAL PROCEDURES (1347)	41.49	11.76	29.73	*.16 *.06 *.11
B	83	DRAW BLOOD FOR LABORATORY TESTS (1232)	60.45	30.75	29.70	*.29 *.18 *.11
B	45	APPLY HEAT BY KEPAD OR CHEMICAL HEATING PAD (194)	72.63	42.97	29.66	*.35 *.30 *.05
C	16	MONITOR PATIENT BLOOD LUSS (357)	39.74	10.32	29.42	*.16 *.03 *.13
A	9	CALL MINISTER, MARSH OR CHAPLAIN FOR PATIENT OR FAMILY (9)	65.16	36.27	28.89	*.24 *.16 *.08
B	186	TEACH PATIENT TO ADMINISTER HIS OWN TREATMENTS (335)	62.90	35.09	27.81	*.30 *.21 *.09
B	97	INSERT NASO-GASTRIC TUBES (246)	60.89	33.18	27.71	*.27 *.15 *.11
C	12	MAKE PRE OR POSTOPERATIVE VISITS FOR THE PURPOSE OF EVALUATING PATIENTS (353)	37.48	9.92	27.56	*.11 *.04 *.07
B	122	ORGANIZE OR RESTOCK INTRAVENOUS CART OR TRAY (271)	77.53	50.00	27.53	*.37 *.34 *.03
B	184	TEACH DIABETIC CARE TO PATIENTS (333)	42.56	15.05	27.52	*.17 *.06 *.11

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DIFFERENCE BETWEEN SP0001 AND SP0002

GPDF01 PAGE 4

A 18	COORDINATE WITH PHYSICIAN REGARDING PATIENT CARE (18)	85.75	58.34	27.41	*6.1	*0.3
B 9	ADMINISTER ENemas (158)	73.95	46.71	27.23	*3.4	*0.2
A 136	SUPERVISE CIVILIAN AUXILIARY NURSING PERSONNEL (136)	41.62	14.72	*2.2	*0.8	*1.4
A 103	PREPARE INPATIENT I.D. BANDS (OTHER THAN INFANT) (103)	53.17	26.28	26.89	*21	*18
B 134	PLIUM ISOLATION, OR REVERSE ISOLATION TECHNIQUE (243)	65.41	39.03	26.89	*3.0	*0.4
B 16	ADMINISTER INTRAMUSCULAR MEDICATIONS (165)	92.59	66.16	26.43	*6.8	*0.5
B 52	SOLVE SUBORDINATES IN MAINTAINING FAVORABLE INTERPERSONAL RELATIONSHIPS WITH PATIENTS (52)	65.85	39.49	26.36	*3.8	*0.6
E 61	SUGGEST OR ORDER LABORATORY OR X-RAY PROCEDURES FOR PATIENTS (55A)	64.65	38.50	26.34	*4.0	*0.3
B 91	GIVE COMPREHENSIVE SKIN CARE (240)	57.44	31.14	26.30	*2.7	*1.9
B 27	ADMINISTER SUBCUTANEOUS MEDICATIONS (176)	81.48	55.39	26.09	*4.1	*0.8
B 43	APPLY HEAT BY CRADLE, HOT WATER BOTTLE OR COMPRESSES (192)	70.61	44.74	26.07	*3.1	*0.3
E 32	OBserve AND RECORD BEHAVIORAL REACTIONS OF PSYCHIATRIC PATIENTS (422)	39.05	13.07	25.97	*1.8	*1.2
B 20	ADMINISTER MEDICATIONS RECTALLY (169)	76.21	50.46	25.95	*3.3	*0.3
B 44	APPLY HEAT BY ELECTRICAL HEATING PAD OR THERMAL BLANKET (193)	60.77	35.09	25.68	*2.5	*0.5
C 19	ORGANIZE SUPPLIES OR EQUIPMENT FOR DELIVERY ROOM	36.91	11.24	25.68	*1.5	*0.7
B 28	ADMINISTER SUHLINGUAL MEDICATIONS (177)	58.25	32.72	25.53	*2.2	*1.6
A 88	PERFORM PATIENT NURSING RECORDS AUDIT (88)	34.09	8.61	25.48	*1.7	*0.3
A 53	IDENTIFY AND RESOLVE HED-CENSUS PROBLEMS (53)	46.70	21.29	25.42	*2.4	*1.3
B 135	PERFORM ORAL HYGIENE (244)	60.89	35.48	25.41	*2.6	*0.4
A 20	COORDINATE WITH WARDMASTER (INC01) REGARDING PATIENT CARE (20)	74.64	49.28	25.36	*4.7	*5.0
E 55	READ AND RECORD CENTRAL VENOUS PRESSURE (4452)	39.17	13.86	25.31	*1.5	*0.5
B 34	ADMINISTER ABDOMINAL, BREAST OR T-BINDER (183)	49.22	23.92	25.30	*1.9	*1.1
B 148	PERFORM URINE TEST FOR SUGAR, ACETONE OR ALBUMIN (297)	76.08	50.85	25.23	*3.6	*0.0
B 24	ADMINISTER NOSE DROPS (173)	68.49	43.43	25.06	*2.6	*0.3
B 120	OBTAIN BLOOD FROM BLOOD BANK (269)	56.75	32.00	24.75	*2.1	*1.7
B 4	ADMINISTER BLADDER IRRIGATIONS (153)	51.48	26.87	24.60	*1.8	*1.4
B 85	EXPLAIN AND APPLY SAFETY REGULATIONS IN CARING FOR PATIENTS (234)	66.92	42.51	24.41	*3.6	*0.7
A 51	GIVE SUBORDINATES IN MAINTAINING FAVORABLE INTERPERSONAL RELATIONSHIPS WITH OTHER HEALTH TEAM MEMBERS (51)	60.58	36.20	24.38	*3.4	*0.5
B 74	CLEAN PATIENT CARE UNIT (223)	69.49	45.27	24.22	*3.5	*4.7
B 31	ADMINISTER VAGINAL IRRIGATIONS (180)	32.89	8.87	24.02	*1.1	*0.3
B 175	SET UP ISOLATION UNITS (324)	56.56	32.72	23.84	*2.2	*0.2
G 30	TEACH OR SUPERVISE INFANT CARE (505)	31.32	7.75	23.57	*2.0	*0.3
B 57	ASSIST PHYSICIAN IN MAKING DIFFERENTIAL DIAGNOSIS (206)	43.31	19.84	23.47	*2.3	*1.0
E 3	ADMINISTER SKIN TESTS (100)	49.47	26.28	23.19	*1.9	*1.6
A 46	EVALUATE THE QUALITY OF PATIENT CARE (46)	53.36	30.95	22.41	*3.3	*0.9
A 66	LABEL SPECIMENS AND FILL OUT LABORATORY SPECIMEN REQUEST FORMS (66)	90.65	68.40	22.25	*6.8	*0.12
A 122	RESOLVE OR REFER COMPLAINTS OF PATIENTS, PERSONNEL OR VISITORS (122)	73.20	51.31	21.88	*4.1	*4.4
C 36	SUPERVISE THE PREPARATION OF PATIENT FOR SURGICAL PROCEDURES (377)	29.06	7.29	21.77	*1.3	*0.2
B 94	IDENTIFY REHABILITATION PROBLEMS OR NEEDS OF PATIENTS (243)	47.08	25.62	21.46	*2.4	*1.4
B 87	FEED INCAPACITATED PATIENTS (236)	56.12	35.61	20.51	*2.3	*0.1
B 187	TEACH PATIENT TO USE VARIOUS TYPES OF EQUIPMENT (336)	47.14	26.81	20.34	*1.9	*0.5

TASKS OMITTED WHERE THE ABSOLUTE DIFFERENCE IN PERCENT MEMBERS PERFORMING IS LESS THAN 20.00					
E 63	TAKE ELECTROCARDIOGRAPH (EKG) TRACINGS (460)	34.59	55.32	-20.73	*15
B 164	REMOVE PLASTER CASTS (313)	10.55	32.52	-21.98	*03
A 64	INVENTORY EQUIPMENT (64)	25.17	47.24	-22.07	*10
B 37	APPLY CASTS TO THE EXTREMITIES (186)	7.41	31.41	-24.00	*02
A 120	REQUISITION LAUNDRY SUPPLIES OR LINEN (120)	20.72	44.88	-24.16	*07
	INVENTORY SUPPLIES (65)	33.58	58.54	-24.96	*15
A 65	SUTURE LACERATIONS (502)	6.15	35.87	-29.72	*02
G 27	DRIVE MILITARY VEHICLES IN PERFORMING (NURSING) (MEDICAL) DUTIES (414)	5.08	35.74	-30.66	*01
E 17					*32
					*30
					*29
					*28
					*44